Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 1 of 52

Fill in this information to identify your case:		
United States Bankruptcy Court for the:		
EASTERN DISTRICT OF VIRGINIA		
Case number (if known)	Chapter you are filing under:	
	Chapter 7	
	☐ Chapter 11	
	☐ Chapter 12	
	☐ Chapter 13	Check if this an amended filing

Official Form 101

Voluntary Petition for Individuals Filing for Bankruptcy

12/17

The bankruptcy forms use you and Debtor 1 to refer to a debtor filing alone. A married couple may file a bankruptcy case together—called a *joint case*—and in joint cases, these forms use you to ask for information from both debtors. For example, if a form asks, "Do you own a car," the answer would be yes if either debtor owns a car. When information is needed about the spouses separately, the form uses *Debtor 1* and *Debtor 2* to distinguish between them. In joint cases, one of the spouses must report information as *Debtor 1* and the other as *Debtor 2*. The same person must be *Debtor 1* in all of the forms.

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Pai	rt 1: Ident	ify Yourself		
			About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
1.	Your full	name		
	Write the i	name that is on	Barbara	
		rnment-issued entification (for	First name	First name
	example,	your driver's	Ann	
	license or	passport).	Middle name	Middle name
	Bring your		Norman	
	identification to your meeting with the trustee.	Last name and Suffix (Sr., Jr., II, III)	Last name and Suffix (Sr., Jr., II, III)	
	All others			
2.		names you have ne last 8 years		
	Include yo maiden na	ur married or ames.		
3.	your Soci number o Individua	ast 4 digits of al Security r federal I Taxpayer tion number	xxx-xx-4160	

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 2 of 52

Debtor 1 Barbara Ann Norman Case number (if known)

		About Debtor 1:	About Debtor 2 (Spouse Only in a Joint Case):
4. Any business names and Employer Identification Numbers (EIN) you have used in the last 8 years Include trade names and doing business as names		■ I have not used any business name or EINs. Business name(s) EINs	☐ I have not used any business name or EINs. Business name(s) EINs
5.	Where you live	1508 Linden Avenue	If Debtor 2 lives at a different address:
		Chesapeake, VA 23325 Number, Street, City, State & ZIP Code	Number, Street, City, State & ZIP Code
		Chesapeake City	
		County	County
		If your mailing address is different from the one above, fill it in here. Note that the court will send any notices to you at this mailing address.	If Debtor 2's mailing address is different from yours, fill it in here. Note that the court will send any notices to this mailing address.
		Number, P.O. Box, Street, City, State & ZIP Code	Number, P.O. Box, Street, City, State & ZIP Code
6.	Why you are choosing this district to file for	Check one:	Check one:
	bankruptcy	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.	Over the last 180 days before filing this petition, I have lived in this district longer than in any other district.
		☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)	☐ I have another reason. Explain. (See 28 U.S.C. § 1408.)

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 3 of 52

Debtor 1 Barbara Ann Norman Case number (if known)

art	Tell the Court About	Your Bank	cruptcy C	ase		
•	The chapter of the Bankruptcy Code you are				f each, see <i>Notice Required by</i> age 1 and check the appropriat	11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy e box.
	choosing to file under	■ Chap	ter 7			
		☐ Chap	ter 11			
		☐ Chap	ter 12			
		☐ Chap				
		·				
	How you will pay the fee	ab ord	out how yellow. If you	ou may pay. Typic	ally, if you are paying the fee yo	k with the clerk's office in your local court for more details urself, you may pay with cash, cashier's check, or mone alf, your attorney may pay with a credit card or check with
		☐ I need to pay the fee in installments. If you choose this option, sign and attach the Application The Filing Fee in Installments (Official Form 103A).				
						n only if you are filing for Chapter 7. By law, a judge may,
		bu tha	t is not red at applies	quired to, waive yo to your family size	ur fee, and may do so only if yo and you are unable to pay the f	ur income is less than 150% of the official poverty line ee in installments). If you choose this option, you must fi Official Form 103B) and file it with your petition.
•	Have you filed for bankruptcy within the	■ No.				
	last 8 years?	☐ Yes.				
			District		When	Case number
			District		When	Case number
			District		When	Case number
0.	Are any bankruptcy	■ No				
	cases pending or being filed by a spouse who is not filing this case with you, or by a business partner, or by an affiliate?	☐ Yes.				
			Debtor			Relationship to you
			District		When	Case number, if known
			Debtor			Relationship to you
			District		When	Case number, if known
1.	Do you rent your	□ No.	Go to	line 12.		
	residence?	Yes.	Has y	our landlord obtain	ed an eviction judgment agains	t you?
				No. Go to line 12	2.	
			_	Yes. Fill out <i>Initia</i> bankruptcy petition		Judgment Against You (Form 101A) and file it with this

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 4 of 52

Case number (if known) Debtor 1 Barbara Ann Norman Part 3: Report About Any Businesses You Own as a Sole Proprietor 12. Are you a sole proprietor of any full- or part-time ☐ No. Go to Part 4. business? Name and location of business Yes. A sole proprietorship is a business you operate as **Brushstrokes by Barbara** an individual, and is not a Name of business, if any separate legal entity such as a corporation, partnership, or LLC. If you have more than one sole proprietorship, use a Number, Street, City, State & ZIP Code separate sheet and attach it to this petition. Check the appropriate box to describe your business: Health Care Business (as defined in 11 U.S.C. § 101(27A)) Single Asset Real Estate (as defined in 11 U.S.C. § 101(51B)) Stockbroker (as defined in 11 U.S.C. § 101(53A)) Commodity Broker (as defined in 11 U.S.C. § 101(6)) None of the above 13. Are you filing under If you are filing under Chapter 11, the court must know whether you are a small business debtor so that it can set appropriate Chapter 11 of the deadlines. If you indicate that you are a small business debtor, you must attach your most recent balance sheet, statement of Bankruptcy Code and are operations, cash-flow statement, and federal income tax return or if any of these documents do not exist, follow the procedure you a small business in 11 U.S.C. 1116(1)(B). debtor? I am not filing under Chapter 11. ■ No. For a definition of small business debtor, see 11 ☐ No. I am filing under Chapter 11, but I am NOT a small business debtor according to the definition in the Bankruptcy U.S.C. § 101(51D). Code. I am filing under Chapter 11 and I am a small business debtor according to the definition in the Bankruptcy Code. ☐ Yes. Part 4: Report if You Own or Have Any Hazardous Property or Any Property That Needs Immediate Attention 14. Do you own or have any No. property that poses or is alleged to pose a threat ☐ Yes. of imminent and What is the hazard? identifiable hazard to public health or safety? Or do you own any If immediate attention is property that needs needed, why is it needed? immediate attention? For example, do you own

Number, Street, City, State & Zip Code

Where is the property?

perishable goods, or

livestock that must be fed, or a building that needs urgent repairs? Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 5 of 52

Debtor 1 Barbara Ann Norman

Case number (if known)

 Tell the court whether you have received a briefing about credit counseling.

Part 5:

The law requires that you receive a briefing about credit counseling before you file for bankruptcy. You must truthfully check one of the following choices. If you cannot do so, you are not eligible to file.

If you file anyway, the court can dismiss your case, you will lose whatever filing fee you paid, and your creditors can begin collection activities again.

Explain Your Efforts to Receive a Briefing About Credit Counseling

About Debtor 1:

You must check one:

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy. If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

☐ I am not required to receive a briefing about credit counseling because of:

☐ Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

☐ Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver credit counseling with the court.

About Debtor 2 (Spouse Only in a Joint Case):

You must check one:

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, and I received a certificate of completion.

Attach a copy of the certificate and the payment plan, if any, that you developed with the agency.

□ I received a briefing from an approved credit counseling agency within the 180 days before I filed this bankruptcy petition, but I do not have a certificate of completion.

Within 14 days after you file this bankruptcy petition, you MUST file a copy of the certificate and payment plan, if any.

I certify that I asked for credit counseling services from an approved agency, but was unable to obtain those services during the 7 days after I made my request, and exigent circumstances merit a 30-day temporary waiver of the requirement.

To ask for a 30-day temporary waiver of the requirement, attach a separate sheet explaining what efforts you made to obtain the briefing, why you were unable to obtain it before you filed for bankruptcy, and what exigent circumstances required you to file this case.

Your case may be dismissed if the court is dissatisfied with your reasons for not receiving a briefing before you filed for bankruptcy.

If the court is satisfied with your reasons, you must still receive a briefing within 30 days after you file. You must file a certificate from the approved agency, along with a copy of the payment plan you developed, if any. If you do not do so, your case may be dismissed.

Any extension of the 30-day deadline is granted only for cause and is limited to a maximum of 15 days.

I am not required to receive a briefing about credit
counseling because of

Incapacity.

I have a mental illness or a mental deficiency that makes me incapable of realizing or making rational decisions about finances.

Disability.

My physical disability causes me to be unable to participate in a briefing in person, by phone, or through the internet, even after I reasonably tried to do so.

Active duty.

I am currently on active military duty in a military combat zone.

If you believe you are not required to receive a briefing about credit counseling, you must file a motion for waiver of credit counseling with the court. Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 6 of 52

Case number (if known) Debtor 1 Barbara Ann Norman Part 6: **Answer These Questions for Reporting Purposes** Are your debts primarily consumer debts? Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an 16. What kind of debts do 16a. you have? individual primarily for a personal, family, or household purpose." ☐ No. Go to line 16b. Yes. Go to line 17. 16b. Are your debts primarily business debts? Business debts are debts that you incurred to obtain money for a business or investment or through the operation of the business or investment. ☐ No. Go to line 16c. ☐ Yes. Go to line 17. 16c. State the type of debts you owe that are not consumer debts or business debts 17. Are you filing under ☐ No. I am not filing under Chapter 7. Go to line 18. Chapter 7? Do you estimate that I am filing under Chapter 7. Do you estimate that after any exempt property is excluded and administrative Yes. after any exempt expenses are paid that funds will be available to distribute to unsecured creditors? property is excluded and administrative expenses ■ No are paid that funds will be available for ☐ Yes distribution to unsecured creditors? 18. How many Creditors do □ 25,001-50,000 **1**,000-5,000 1-49 you estimate that you **5001-10,000 5**0,001-100,000 □ 50-99 owe? **1**0,001-25,000 ☐ More than 100,000 □ 100-199 □ 200-999 19. How much do you □ \$500,000,001 - \$1 billion □ \$1,000,001 - \$10 million **\$0 - \$50,000** estimate your assets to □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion □ \$50,001 - \$100,000 be worth? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion □ \$100,001 - \$500,000 □ \$100,000,001 - \$500 million ■ More than \$50 billion □ \$500,001 - \$1 million How much do you □ \$1,000,001 - \$10 million □ \$0 - \$50,000 □ \$500,000,001 - \$1 billion estimate your liabilities \$50,001 - \$100,000 □ \$10,000,001 - \$50 million □ \$1,000,000,001 - \$10 billion to be? □ \$50,000,001 - \$100 million □ \$10,000,000,001 - \$50 billion **\$100,001 - \$500,000** □ \$100,000,001 - \$500 million ☐ More than \$50 billion □ \$500,001 - \$1 million Sign Below Part 7: I have examined this petition, and I declare under penalty of perjury that the information provided is true and correct. For you If I have chosen to file under Chapter 7, I am aware that I may proceed, if eligible, under Chapter 7, 11,12, or 13 of title 11, United States Code. I understand the relief available under each chapter, and I choose to proceed under Chapter 7. If no attorney represents me and I did not pay or agree to pay someone who is not an attorney to help me fill out this document, I have obtained and read the notice required by 11 U.S.C. § 342(b). I request relief in accordance with the chapter of title 11, United States Code, specified in this petition. I understand making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Barbara Ann Norman Signature of Debtor 2 Barbara Ann Norman Signature of Debtor 1 Executed on February 5, 2019 Executed on MM / DD / YYYY MM / DD / YYYY

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 7 of 52

Debtor 1 Barbara Ann Norman Case number (if known)

For your attorney, if you are represented by one

If you are not represented by an attorney, you do not need to file this page. I, the attorney for the debtor(s) named in this petition, declare that I have informed the debtor(s) about eligibility to proceed under Chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available under each chapter for which the person is eligible. I also certify that I have delivered to the debtor(s) the notice required by 11 U.S.C. § 342(b) and, in a case in which § 707(b)(4)(D) applies, certify that I have no knowledge after an inquiry that the information in the schedules filed with the petition is incorrect.

/s/ Dana S	5. Power	Date	February 5, 2019
Signature of	Attorney for Debtor		MM / DD / YYYY
Dana S. P	ower 33101		
Printed name			
Harbour L	aw, P.L.C		
Firm name	•		
500 E. Plu	me St.		
Suite 801			
Norfolk, V	A 23510		
	City, State & ZIP Code		
Contact phone	757-622-1621	Email address	power@harbourlaw.us
33101 VA			
Bar number & S	tate		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

		Bootin	ent rade o or or	
Fill in this infor	mation to identify your	case:		
Debtor 1	Barbara Ann Nori	man		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT O	OF VIRGINIA	
Case number				
(if known)				

Official Form 106Sum

Summary of Your Assets and Liabilities and Certain Statistical Information

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Fill out all of your schedules first; then complete the information on this form. If you are filing amended schedules after you file your original forms, you must fill out a new *Summary* and check the box at the top of this page.

Par	t 1: Summarize Your Assets		
		Your as	ssets If what you own
1.	Schedule A/B: Property (Official Form 106A/B) 1a. Copy line 55, Total real estate, from Schedule A/B	\$	0.00
	1b. Copy line 62, Total personal property, from Schedule A/B	\$	17,538.00
	1c. Copy line 63, Total of all property on Schedule A/B	\$	17,538.00
Par	t 2: Summarize Your Liabilities		
			abilities t you owe
2.	Schedule D: Creditors Who Have Claims Secured by Property (Official Form 106D) 2a. Copy the total you listed in Column A, Amount of claim, at the bottom of the last page of Part 1 of Schedule D	\$	28,211.00
3.	Schedule E/F: Creditors Who Have Unsecured Claims (Official Form 106E/F) 3a. Copy the total claims from Part 1 (priority unsecured claims) from line 6e of Schedule E/F	\$	0.00
	3b. Copy the total claims from Part 2 (nonpriority unsecured claims) from line 6j of Schedule E/F	\$	21,861.00
	Your total liabilities	\$	50,072.00
Par	t 3: Summarize Your Income and Expenses		
4.	Schedule I: Your Income (Official Form 106I) Copy your combined monthly income from line 12 of Schedule I	\$	5,079.00
5.	Schedule J: Your Expenses (Official Form 106J) Copy your monthly expenses from line 22c of Schedule J	\$	5,080.00
Par	t 4: Answer These Questions for Administrative and Statistical Records		
6.	Are you filing for bankruptcy under Chapters 7, 11, or 13? No. You have nothing to report on this part of the form. Check this box and submit this form to the court with you	our other so	chedules.
7.	■ Yes What kind of debt do you have?		
	Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for	a nerconal	family or

- Your debts are primarily consumer debts. Consumer debts are those "incurred by an individual primarily for a personal, family, or household purpose." 11 U.S.C. § 101(8). Fill out lines 8-9g for statistical purposes. 28 U.S.C. § 159.
- Your debts are not primarily consumer debts. You have nothing to report on this part of the form. Check this box and submit this form to the court with your other schedules.

Official Form 106Sum

Entered 02/05/19 17:42:00 Desc Main Case 19-70454-SCS Filed 02/05/19 Doc 1 Page 9 of 52
Case number (if known) Document

Debtor 1 Barbara Ann Norman

8.	From the Statement of Your Current Monthly Income: Copy your total current monthly income from Official Form
	122A-1 Line 11; OR , Form 122B Line 11; OR , Form 122C-1 Line 14.

5,021.00 \$

9. Copy the following special categories of claims from Part 4, line 6 of Schedule E/F:

	lotal c	laım
From Part 4 on Schedule E/F, copy the following:		
9a. Domestic support obligations (Copy line 6a.)	\$	0.00
9b. Taxes and certain other debts you owe the government. (Copy line 6b.)	\$	0.00
9c. Claims for death or personal injury while you were intoxicated. (Copy line 6c.)	\$	0.00
9d. Student loans. (Copy line 6f.)	\$	7,722.00
9e. Obligations arising out of a separation agreement or divorce that you did not report as priority claims. (Copy line 6g.)	\$	0.00
9f. Debts to pension or profit-sharing plans, and other similar debts. (Copy line 6h.)	+\$	0.00
9g. Total. Add lines 9a through 9f.	\$	7,722.00

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

		Document	Page 10 of 52		
Fill in this infor	mation to identify your ca	ase and this filing:			
Debtor 1	Barbara Ann Norma				
Debtor 2	First Name	Middle Name	Last Name		
(Spouse, if filing)	First Name	Middle Name	Last Name		
United States Ba	inkruptcy Court for the: E	ASTERN DISTRICT OF VIRG	iNIA		
					_
Case number _			_		Check if this is a amended filing
Official Fo	rm 106A/B				
Schedul	e A/B: Prope	rtv			12/15
it fits best. Be as c more space is need	omplete and accurate as pos led, attach a separate sheet t	ems. List an asset only once. If a sible. If two married people are f o this form. On the top of any ad	iling together, both are equa ditional pages, write your na	ally responsible for supplying	correct information. If
Part 1: Describe	Each Residence, Building, La	and, or Other Real Estate You Ov	or have an interest in		
1. Do you own or h	ave any legal or equitable int	terest in any residence, building,	land, or similar property?		
■ No. Go to Par	t 2.				
☐ Yes. Where is	s the property?				
Part 2: Describe	Your Vehicles				
□ No ■ Yes					
3.1 Make:	Nissan	Who has an interest in the	ne property? Check one	Do not deduct secured cla	
_	Rogue	Debtor 1 only		Creditors Who Have Clair	
_	2015	Debtor 2 only		Current value of the	Current value of the
Approximate Other inform		Debtor 1 and Debtor 2 At least one of the deb	•	entire property?	portion you own?
		Check if this is comm		\$11,775.00	\$11,775.00
3.2 Make:	Dodge	Who has an interest in the	ne property? Check one	Do not deduct secured cla the amount of any secure	
	Van	Debtor 1 only		Creditors Who Have Clair	
_	2001	Debtor 2 only		Current value of the	Current value of the
Approximate Other inform		Debtor 1 and Debtor 2 At least one of the deb	•	entire property?	portion you own?
	needs new engine	At least one of the deb	tors and another		
Di okon,		Check if this is comm (see instructions)	nunity property	\$500.00	\$500.00
		s and other recreational vel			
Examples: Boa	ts, trailers, motors, person	al watercraft, fishing vessels,	snowmobiles, motorcycle	accessories	
■ No					
- NO					

☐ Yes

Official Form 106A/B Schedule A/B: Property page 1 Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 11 of 52

Rarbara Ann Norman Case number (if known)

Debtor 1	Barbara Ann Norman	Case number (f known)
		ou own for all of your entries from Part 2, including any entries fo Vrite that number here	
	Describe Your Personal and Househ		O
Do you d	own or nave any legal or equital	ole interest in any of the following items?	Current value of the portion you own? Do not deduct secured claims or exemptions.
<i>Exam</i> □ No	chold goods and furnishings ples: Major appliances, furniture, I	inens, china, kitchenware	
■ Yes	s. Describe		
	chest of dra pictures, fa	goods and furnishings: chairs, sofa, end tables, beds, awers, dining table, dining chairs, knick knacks, books, ns, rugs, lamps, vacuum cleaner, stove, small kitchen , dishes, pots and pans, silverware	\$1,540.00
	bed and ma	attress	\$800.00
□ No		o, video, stereo, and digital equipment; computers, printers, scanners ras, media players, games	; music collections; electronic devices
	lantan radi	to divid player to (2)	\$1,020.00
	laptop, radi	o, dvd player, tv (3)	φ1,020.00
Exam ■ No □ Yes	ctibles of value ples: Antiques and figurines; paint other collections, memorabil s. Describe ment for sports and hobbies	ings, prints, or other artwork; books, pictures, or other art objects; sta ia, collectibles	mp, coin, or baseball card collections;
		se, and other hobby equipment; bicycles, pool tables, golf clubs, skis	canoes and kayaks; carpentry tools;
	s. Describe		
	paints, can	vases and brushes	\$20.00
■ No	rms mples: Pistols, rifles, shotguns, ans. Describe	nmunition, and related equipment	
11. Cloth <i>Exar</i> □ No		her coats, designer wear, shoes, accessories	
	s. Describe		
	wearing ap	parel	\$500.00
☐ No		jewelry, engagement rings, wedding rings, heirloom jewelry, watches	, gems, gold, silver

Official Form 106A/B Schedule A/B: Property page 2

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 12 of 52

Case number (if known) Debtor 1 **Barbara Ann Norman** Costume Jewelry \$25.00 13. Non-farm animals Examples: Dogs, cats, birds, horses No ☐ Yes. Describe..... 14. Any other personal and household items you did not already list, including any health aids you did not list ■ No ☐ Yes. Give specific information..... 15. Add the dollar value of all of your entries from Part 3, including any entries for pages you have attached \$3.905.00 for Part 3. Write that number here Part 4: Describe Your Financial Assets Do you own or have any legal or equitable interest in any of the following? Current value of the portion you own? Do not deduct secured claims or exemptions. 16. Cash Examples: Money you have in your wallet, in your home, in a safe deposit box, and on hand when you file your petition □ No ■ Yes..... cash \$60.00 17. Deposits of money Examples: Checking, savings, or other financial accounts; certificates of deposit; shares in credit unions, brokerage houses, and other similar institutions. If you have multiple accounts with the same institution, list each. □ No Institution name: ■ Yes..... \$50.00 **State Employees Credit Union** Savings 17.1. funds in BB&T bank account, currently has a garnishment lien - balance was \$488 at time \$0.00 Checking 17.2. account frozen 18. Bonds, mutual funds, or publicly traded stocks Examples: Bond funds, investment accounts with brokerage firms, money market accounts ■ No ☐ Yes..... Institution or issuer name: 19. Non-publicly traded stock and interests in incorporated and unincorporated businesses, including an interest in an LLC, partnership, and joint venture ■ No ☐ Yes. Give specific information about them..... Name of entity: % of ownership: 20. Government and corporate bonds and other negotiable and non-negotiable instruments Negotiable instruments include personal checks, cashiers' checks, promissory notes, and money orders. Non-negotiable instruments are those you cannot transfer to someone by signing or delivering them. ☐ Yes. Give specific information about them

Official Form 106A/B Schedule A/B: Property page 3

Issuer name:

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 13 of 52 Case number (if known) Debtor 1 **Barbara Ann Norman** 21. Retirement or pension accounts Examples: Interests in IRA, ERISA, Keogh, 401(k), 403(b), thrift savings accounts, or other pension or profit-sharing plans □ No Yes. List each account separately. Type of account: Institution name: \$709.00 retirement account 403(b) 22. Security deposits and prepayments Your share of all unused deposits you have made so that you may continue service or use from a company Examples: Agreements with landlords, prepaid rent, public utilities (electric, gas, water), telecommunications companies, or others ☐ No Institution name or individual: Yes. Landlord security deposit Unknown 23. Annuities (A contract for a periodic payment of money to you, either for life or for a number of years) No Issuer name and description. ☐ Yes..... 24. Interests in an education IRA, in an account in a qualified ABLE program, or under a qualified state tuition program. 26 U.S.C. §§ 530(b)(1), 529A(b), and 529(b)(1). ■ No Institution name and description. Separately file the records of any interests.11 U.S.C. § 521(c): ☐ Yes..... 25. Trusts, equitable or future interests in property (other than anything listed in line 1), and rights or powers exercisable for your benefit □ No Yes. Give specific information about them... Potential interest in inheritance, lottery, insurance proceeds, Unknown and/or property settlement 26. Patents, copyrights, trademarks, trade secrets, and other intellectual property Examples: Internet domain names, websites, proceeds from royalties and licensing agreements No ☐ Yes. Give specific information about them... 27. Licenses, franchises, and other general intangibles Examples: Building permits, exclusive licenses, cooperative association holdings, liquor licenses, professional licenses ■ No ☐ Yes. Give specific information about them... Money or property owed to you? Current value of the portion you own? Do not deduct secured claims or exemptions. 28. Tax refunds owed to you □ No Yes. Give specific information about them, including whether you already filed the returns and the tax years...... Interest in any and all tax refunds including the 2018 Tax Refund and \$1.00 2019 refund (pro-rated)

29. Family support

Examples: Past due or lump sum alimony, spousal support, child support, maintenance, divorce settlement, property settlement

■ N

☐ Yes. Give specific information.....

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00

Page 14 of 52 Document Case number (if known) Debtor 1 **Barbara Ann Norman** 30. Other amounts someone owes you Examples: Unpaid wages, disability insurance payments, disability benefits, sick pay, vacation pay, workers' compensation, Social Security benefits; unpaid loans you made to someone else ☐ No Yes. Give specific information.. \$0.00 Interest in earned and unpaid sick pay/ vacation \$50.00 Interest in future wages 31. Interests in insurance policies Examples: Health, disability, or life insurance; health savings account (HSA); credit, homeowner's, or renter's insurance □ No Yes. Name the insurance company of each policy and list its value. Beneficiary: Surrender or refund Company name: value: term life insurance \$0.00 32. Any interest in property that is due you from someone who has died If you are the beneficiary of a living trust, expect proceeds from a life insurance policy, or are currently entitled to receive property because someone has died. ■ No ☐ Yes. Give specific information... 33. Claims against third parties, whether or not you have filed a lawsuit or made a demand for payment Examples: Accidents, employment disputes, insurance claims, or rights to sue No ☐ Yes. Describe each claim....... 34. Other contingent and unliquidated claims of every nature, including counterclaims of the debtor and rights to set off claims ☐ No Yes. Describe each claim....... Interest in any claims Unknown 35. Any financial assets you did not already list ☐ No Yes. Give specific information.. \$488.00 Frozen bank account (BB&T) Add the dollar value of all of your entries from Part 4, including any entries for pages you have attached \$1.358.00 for Part 4. Write that number here..... Part 5: Describe Any Business-Related Property You Own or Have an Interest In. List any real estate in Part 1. 37. Do you own or have any legal or equitable interest in any business-related property? No. Go to Part 6. ☐ Yes. Go to line 38.

Describe Any Farm- and Commercial Fishing-Related Property You Own or Have an Interest In. If you own or have an interest in farmland, list it in Part 1.

46. Do you own or have any legal or equitable interest in any farm- or commercial fishing-related property?

No. Go to Part 7.

page 5

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Page 15 of 52

Case number (if known) Document Debtor 1 **Barbara Ann Norman** ☐ Yes. Go to line 47. Part 7: Describe All Property You Own or Have an Interest in That You Did Not List Above 53. Do you have other property of any kind you did not already list? Examples: Season tickets, country club membership ■ No ☐ Yes. Give specific information....... 54. Add the dollar value of all of your entries from Part 7. Write that number here \$0.00 List the Totals of Each Part of this Form Part 8: 55. Part 1: Total real estate, line 2 \$0.00 Part 2: Total vehicles, line 5 \$12,275.00 Part 3: Total personal and household items, line 15 57. \$3,905.00 Part 4: Total financial assets, line 36 58. \$1,358.00 Part 5: Total business-related property, line 45 59. \$0.00 Part 6: Total farm- and fishing-related property, line 52 60. \$0.00 Part 7: Total other property not listed, line 54 \$0.00 Total personal property. Add lines 56 through 61... Copy personal property total \$17,538.00 \$17,538.00

Official Form 106A/B Schedule A/B: Property page 6

63. Total of all property on Schedule A/B. Add line 55 + line 62

\$17,538.00

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

Fill in this infor	rmation to identify your	case:				
Debtor 1 Barbara Ann Norman						
	First Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing)	First Name	Middle Name	Last Name			
United States B	ankruptcy Court for the:	EASTERN DISTRICT C	F VIRGINIA			
Case number						
(if known)						

Official Form 106C

Schedule C: The Property You Claim as Exempt

4/16

Specific laws that allow exemption

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. Using the property you listed on *Schedule A/B: Property* (Official Form 106A/B) as your source, list the property that you claim as exempt. If more space is needed, fill out and attach to this page as many copies of *Part 2: Additional Page* as necessary. On the top of any additional pages, write your name and case number (if known).

For each item of property you claim as exempt, you must specify the amount of the exemption you claim. One way of doing so is to state a specific dollar amount as exempt. Alternatively, you may claim the full fair market value of the property being exempted up to the amount of any applicable statutory limit. Some exemptions—such as those for health aids, rights to receive certain benefits, and tax-exempt retirement funds—may be unlimited in dollar amount. However, if you claim an exemption of 100% of fair market value under a law that limits the exemption to a particular dollar amount and the value of the property is determined to exceed that amount, your exemption would be limited to the applicable statutory amount.

Brief description of the property and line on

- 1. Which set of exemptions are you claiming? Check one only, even if your spouse is filing with you.
 - You are claiming state and federal nonbankruptcy exemptions. 11 U.S.C. § 522(b)(3)
 - ☐ You are claiming federal exemptions. 11 U.S.C. § 522(b)(2)
- 2. For any property you list on Schedule A/B that you claim as exempt, fill in the information below.

Current value of the

Schedule A/B that lists this property	portion you own		,	
	Copy the value from Schedule A/B	Che	eck only one box for each exemption.	
2015 Nissan Rogue 100,000 miles Line from Schedule A/B: 3.1	\$11,775.00		\$1.00	Va. Code Ann. § 34-26(8)
Line from Schedule AVB. 3.1			100% of fair market value, up to any applicable statutory limit	
2015 Nissan Rogue 100,000 miles Line from Schedule A/B: 3.1	\$11,775.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.1			100% of fair market value, up to any applicable statutory limit	
2001 Dodge Van 150000 miles Broken, needs new engine	\$500.00		\$1.00	Va. Code Ann. § 34-26(8)
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	
2001 Dodge Van 150000 miles Broken, needs new engine	\$500.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 3.2			100% of fair market value, up to any applicable statutory limit	

Amount of the exemption you claim

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 17 of 52

			•	
Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from Schedule A/B		ount of the exemption you claim	Specific laws that allow exemption
Household goods and furnishings: chairs, sofa, end tables, beds, chest	\$1,540.00	•	\$1,540.00	Va. Code Ann. § 34-26(4a)
of drawers, dining table, dining chairs, knick knacks, books, pictures, fans, rugs, lamps, vacuum cleaner, stove, small kitchen appliances, dishes, pots and pans, silverware Line from Schedule A/B: 6.1			100% of fair market value, up to any applicable statutory limit	
ped and mattress	\$800.00		\$1.00	Va. Code Ann. § 34-26(4a)
Line from Schedule A/B: 6.2			100% of fair market value, up to any applicable statutory limit	
aptop, radio, dvd player, tv (3) _ine from Schedule A/B: 7.1	\$1,020.00		\$1,020.00	Va. Code Ann. § 34-26(4a)
			100% of fair market value, up to any applicable statutory limit	
aptop, radio, dvd player, tv (3)	\$1,020.00		\$1.00	Va. Code Ann. § 34-4
Line Holli Schedule A/B. 1.1			100% of fair market value, up to any applicable statutory limit	
paints, canvases and brushes	\$20.00		\$20.00	Va. Code Ann. § 34-4
Line nom <i>Schedule A/D.</i> 3.1			100% of fair market value, up to any applicable statutory limit	
wearing apparel _ine from Schedule A/B: 11.1	\$500.00		\$500.00	Va. Code Ann. § 34-26(4)
			100% of fair market value, up to any applicable statutory limit	
Costume Jewelry Line from Schedule A/B: 12.1	\$25.00		\$25.00	Va. Code Ann. § 34-4
Line Holli Schedule A/B. 12.1			100% of fair market value, up to any applicable statutory limit	
cash ine from <i>Schedule A/B</i> : 16.1	\$60.00		\$60.00	Va. Code Ann. § 34-4
and none derivative PAB. 10.1			100% of fair market value, up to any applicable statutory limit	
Savings: State Employees Credit Union	\$50.00		\$50.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 17.1			100% of fair market value, up to any applicable statutory limit	
Checking: funds in BB&T bank account, currently has a garnishment	\$0.00		\$1.00	Va. Code Ann. § 34-4
lien - balance was \$488 at time account frozen ine from Schedule A/B: 17.2			100% of fair market value, up to any applicable statutory limit	
retirement account 403(b)	\$709.00		\$709.00	Va. Code Ann. § 34-34
Line from Schedule A/B: 21.1			100% of fair market value, up to any applicable statutory limit	

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 18 of 52

Brief description of the property and line on Schedule A/B that lists this property	Current value of the portion you own Copy the value from		ount of the exemption you claim ck only one box for each exemption.	Specific laws that allow exemption
retirement account 403(b) Line from Schedule A/B: 21.1	\$709.00	•	\$1.00	112 S Ct. 2242
Line Holl Schedule A/B. 21.1			100% of fair market value, up to any applicable statutory limit	
retirement account 403(b) Line from Schedule A/B: 21.1	\$709.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Landlord security deposit Line from Schedule A/B: 22.1	Unknown		\$1.00	Va. Code Ann. § 34-4
Elle Holli Gorioddie 7 v 2. 221 ·			100% of fair market value, up to any applicable statutory limit	
Potential interest in inheritance, lottery, insurance proceeds, and/or	Unknown		\$1.00	Va. Code Ann. § 34-4
property settlement Line from Schedule A/B: 25.1			100% of fair market value, up to any applicable statutory limit	
Interest in any and all tax refunds including the 2018 Tax Refund and	\$1.00		\$1.00	Va. Code Ann. § 34-4
2019 refund (pro-rated) Line from Schedule A/B: 28.1			100% of fair market value, up to any applicable statutory limit	
Interest in earned and unpaid sick pay/ vacation	\$0.00		\$1.00	Va. Code Ann. § 34-4
Line from Schedule A/B: 30.1			100% of fair market value, up to any applicable statutory limit	
Interest in future wages Line from Schedule A/B: 30.2	\$50.00		\$12.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Interest in future wages Line from Schedule A/B: 30.2	\$50.00		\$38.00	Va. Code Ann. § 34-29
Ellio IIOIII Governo 7 v E. COIE			100% of fair market value, up to any applicable statutory limit	
term life insurance Line from Schedule A/B: 31.1	\$0.00		\$1.00	Va. Code Ann. § 38.2-3811
			100% of fair market value, up to any applicable statutory limit	
term life insurance Line from Schedule A/B: 31.1	\$0.00		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Interest in any claims Line from Schedule A/B: 34.1	Unknown		\$1.00	Va. Code Ann. § 34-4
			100% of fair market value, up to any applicable statutory limit	
Frozen bank account (BB&T) Line from Schedule A/B: 35.1	\$488.00		\$488.00	Va. Code Ann. § 34-4
Line from Schequie A/B: 33. I				

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 19 of 52

3.		laiming a homestead exemption of more than \$160,375? adjustment on 4/01/19 and every 3 years after that for cases filed on or after the date of adjustment.)
	No	
	Yes.	Did you acquire the property covered by the exemption within 1,215 days before you filed this case?
		No
		Yes

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

		Document	Page 2	0 of 52		
Fill in this information	on to identify you	r case:				
Debtor 1 B	Barbara Ann No	rman				
_	rst Name	Middle Name	Last Name			
Debtor 2						
(Spouse if, filing) Fi	rst Name	Middle Name	Last Name			
United States Bankrup	ptcy Court for the:	EASTERN DISTRICT OF VIRG	SINIA			
Case number					— Observe	Markette de la
(if known)					_	if this is an led filing
					ameno	led filling
Official Form 10	06D					
		Who Hove Claims	Sagura	d by Droporty		40/45
Scriedule D.	Creditors	Who Have Claims S	secure	d by Property		12/15
		two married people are filing together				
needed, copy the Addition known).	onal Page, fill it out,	number the entries, and attach it to th	is form. On th	ne top of any additional pa	ges, write your name ar	nd case number (if
1. Do any creditors have	claims secured by	vour property?				
		nis form to the court with your other	cchodulos	Vou have nothing also t	a rapart on this form	
_		,	scriedules.	Tou have nothing else to	o report on this form.	
■ Yes. Fill in all o	of the information I	below.				
Part 1: List All Se	cured Claims					
		ore than one secured claim, list the credi			Column B	Column C
		articular claim, list the other creditors in P er according to the creditor's name.	art 2. As much	n Amount of claim Do not deduct the	Value of collateral that supports this	Unsecured portion
as possible, list the claim	s in alphabetical orde	according to the creditor 3 harrie.		value of collateral.	claim	If any
2.1 Grand Brands	S	Describe the property that secures the	ne claim:	\$1,411.00	\$800.00	\$611.00
Creditor's Name		bed and mattress				
1305 Baker R	oad	As of the date you file, the claim is: C	Check all that			
Virginia Beac		apply.				
Number, Street, City,		☐ Contingent☐ Unliquidated				
reambor, outdoor, only,	otato a zip oodo	☐ Disputed				
Who owes the debt?	Check one.	Nature of lien. Check all that apply.				
■ Debtor 1 only		☐ An agreement you made (such as m	nortgage or se	cured		
Debtor 2 only		car loan)				
Debtor 1 and Debtor 2	2 only	☐ Statutory lien (such as tax lien, med	hanic's lien)			
☐ At least one of the del	•	☐ Judgment lien from a lawsuit	,			
☐ Check if this claim re	elates to a	Other (including a right to offset)	Purchase	Money Security		
community debt		, , , , ,				
Date debt was incurred	12/28/17	Last 4 digits of account number	er 1606			
		·				
2.2 Loan Smart		Describe the property that secures the	ne claim:	\$8,000.00	\$500.00	\$7,500.00
Creditor's Name		2001 Dodge Van 150000 mile				
		Broken, needs new engine				
4209 East Ind	ian River	As of the data was file the plain in O	N 1 11 11 1			
Road		As of the date you file, the claim is: C apply.	neck all that			
Chesapeake,		☐ Contingent				
Number, Street, City,	State & Zip Code	Unliquidated				
Who ower the debt?	Charle and	Disputed				
Who owes the debt?	CHECK One.	Nature of lien. Check all that apply.		aad		
Debtor 1 only		An agreement you made (such as m car loan)	nortgage or se	cured		
Debtor 2 only	0	_	handala P. A			
Debtor 1 and Debtor 2	•	☐ Statutory lien (such as tax lien, med	nanic's lien)			
☐ At least one of the del☐ Check if this claim re		Judgment lien from a lawsuit	Title Loan			
community debt	ะเสเธ อ เ ∪ đ	Other (including a right to offset)	Loan			
-		Land British of				
Date debt was incurred		Last 4 digits of account numb	er			

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 21 of 52

Deb	tor 1 Barbara Ann Norman		Case number (if known)				
	First Name Middle	Name Last Name	-				
2.3	Nissan Motor Acceptance	Describe the property that secures the	ie claim:	\$18,800.00	\$11,775.00	\$7,025.00	
	Creditor's Name	2015 Nissan Rogue 100,000	miles				
	NMAC Bankruptcy Department						
	P.O. Box 660366 Dallas, TX 75266-0366	As of the date you file, the claim is: Capply. Contingent	heck all that				
	Number, Street, City, State & Zip Code	☐ Unliquidated					
Who	o owes the debt? Check one.	☐ Disputed Nature of lien. Check all that apply.					
_	Debtor 1 only Debtor 2 only	An agreement you made (such as m car loan)	ortgage or so	ecured			
	Debtor 1 and Debtor 2 only	☐ Statutory lien (such as tax lien, med	nanic's lien)				
ПА	t least one of the debtors and another	☐ Judgment lien from a lawsuit					
	check if this claim relates to a community debt	Other (including a right to offset)	Purchase	e Money Security			
Date	debt was incurred 1/6/16	Last 4 digits of account numb	er <u>0001</u>	<u> </u>			
Ad	d the dollar value of your entries in C	Column A on this page. Write that number	er here:	\$28,211.0	0		
	his is the last page of your form, add ite that number here:	the dollar value totals from all pages.		\$28,211.0	0		

Part 2: List Others to Be Notified for a Debt That You Already Listed

Use this page only if you have others to be notified about your bankruptcy for a debt that you already listed in Part 1. For example, if a collection agency is trying to collect from you for a debt you owe to someone else, list the creditor in Part 1, and then list the collection agency here. Similarly, if you have more than one creditor for any of the debts that you listed in Part 1, list the additional creditors here. If you do not have additional persons to be notified for any debts in Part 1, do not fill out or submit this page.

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

			Document	Page 22 of 52		
Fill in	this inform	nation to identify your	case:			
Debto	or 1	Barbara Ann Norr	nan			
		First Name	Middle Name	Last Name		
Debto						
(Spouse	e if, filing)	First Name	Middle Name	Last Name		
United	d States Ban	kruptcy Court for the:	EASTERN DISTRICT OF V	IRGINIA		
Case	number					
(if know						Check if this is an
					a	mended filing
Offic	ial Form	106E/F				
			ha Haya Unaasiira	d Claima		12/15
			ho Have Unsecure	ITY claims and Part 2 for creditors with NO		
D: Cred	ditors Who Ha ntinuation Paç r (if known).	ive Claims Secured by Pro	operty. If more space is needed, e no information to report in a Pa	Do not include any creditors with partially copy the Part you need, fill it out, number art, do not file that Part. On the top of any	the entries in the b	oxes on the left. Attach
		s have priority unsecured				
_	No. Go to Pa		olamo agamot you.			
	l Yes.	ut 2.				
Part 2		of Your NONPRIORIT	V Unsecured Claims			
		s have nonpriority unsecu				
_						
	No. You have	e nothing to report in this pa	rt. Submit this form to the court wit	th your other schedules.		
	Yes.					
cla	aim, list the cre	editor separately for each cla	aim. For each claim listed, identify	the creditor who holds each claim. If a cred what type of claim it is. Do not list claims alre one than three nonpriority unsecured claims file	ady included in Part	t 1. If more than one on Page of Part 2.
						Total claim
4.1	Ally Fina		Last 4 digits of a	ccount number 8627		\$7,828.00
	P.O. Box	Creditor's Name 380901	When was the de	ebt incurred?		
		gton, MN 55438-090)1			_
		eet City State Zlp Code	As of the date yo	ou file, the claim is: Check all that apply		
		red the debt? Check one.	☐ Contingent			
	■ Debtor ′	1 only	☐ Unliquidated			
	Debtor 2	2 only	☐ Disputed			
	Debtor 1	1 and Debtor 2 only		ORITY unsecured claim:		
	☐ At least	one of the debtors and ano				
		if this claim is for a comm		ising out of a separation agreement or divorcelaims	e that you did not	
	■ No		☐ Debts to pens	ion or profit-sharing plans, and other similar c	lebts	
	☐ Yes		Other. Specify	repo deficiency		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 23 of 52

Dept	or 1 Barbara Ann Norman	Case number (if known)	
4.2	Chesapeake General Hospital	Last 4 digits of account number	\$320.00
	Nonpriority Creditor's Name 736 Battlefield Blvd North	When was the debt incurred?	
	Chesapeake, VA 23320 Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
		☐ Contingent	
	Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	☐ At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	■ Other. Specify Medical Bill	
4.3	Elizabeth River Tunnels	Last 4 digits of account number	\$90.00
	Nonpriority Creditor's Name 700 Port Centre Pkwy	When was the debt incurred?	
	Suite 2B Portsmouth, VA 23704-5901		
	Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
	Who incurred the debt? Check one.		
	Debtor 1 only	☐ Contingent	
	Debtor 2 only	☐ Unliquidated	
	Debtor 1 and Debtor 2 only	Disputed	
	☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim:	
		☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	No	☐ Debts to pension or profit-sharing plans, and other similar debts	
	Yes	Other. Specify tolls	
4.4	Home Depot	Last 4 digits of account number 7796	\$275.00
	Nonpriority Creditor's Name		Ψ213.00
	P O Box 9001010	When was the debt incurred?	
	Louisville, KY 40290	As of the date was file the plains in Oberly all that are by	
	Number Street City State Zlp Code Who incurred the debt? Check one.	As of the date you file, the claim is: Check all that apply	
	<u> </u>	☐ Contingent	
	■ Debtor 1 only	☐ Unliquidated	
	Debtor 2 only	☐ Disputed	
	Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
	At least one of the debtors and another	☐ Student loans	
	☐ Check if this claim is for a community debt Is the claim subject to offset?	\square Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
	■ No	lacksquare Debts to pension or profit-sharing plans, and other similar debts	
	☐Yes	Other, Specify consumer debt	

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 24 of 52

Barbara Ann Norman	Case number (if known)	
Home Depot CBNA	Last 4 digits of account number	\$295.00
Nonpriority Creditor's Name PO Box 6497 Sioux Falls, SD 57117-6497	When was the debt incurred? 12/16/17	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	☐ Contingent	
Debtor 1 only	☐ Unliquidated	
Debtor 2 only	☐ Disputed	
☐ Debtor 1 and Debtor 2 only	Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	☐ Student loans	
☐ Check if this claim is for a community debt Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
Yes	■ Other. Specify Credit Card Purchases	
Money Mart	Last 4 digits of account number	\$638.00
Nonpriority Creditor's Name 848 Granby Street Norfolk, VA 23510	When was the debt incurred?	
Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.		
Debtor 1 only	Contingent	
Debtor 2 only	☐ Unliquidated	
Debtor 1 and Debtor 2 only	Disputed	
☐ At least one of the debtors and another	Type of NONPRIORITY unsecured claim: ☐ Student loans	
☐ Check if this claim is for a community debt		
Is the claim subject to offset?	☐ Obligations arising out of a separation agreement or divorce that you did not report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
□ Yes	Other. Specify consumer debt	
Office of the U.S. Trustee	Last 4 digits of account number	\$0.00
Nonpriority Creditor's Name 200 Granby Street	When was the debt incurred?	
Room 625 Norfolk, VA 23510 Number Street City State Zlp Code	As of the date you file, the claim is: Check all that apply	
Who incurred the debt? Check one.	Contingent	
■ Debtor 1 only		
☐ Debtor 2 only	☐ Unliquidated	
☐ Debtor 1 and Debtor 2 only	☐ Disputed Type of NONPRIORITY unsecured claim:	
☐ At least one of the debtors and another	Student loans	
☐ Check if this claim is for a community debt	☐ Obligations arising out of a separation agreement or divorce that you did not	
Is the claim subject to offset?	report as priority claims	
■ No	☐ Debts to pension or profit-sharing plans, and other similar debts	
☐ Yes	■ Other, Specify Notification Only	
· · · · · · · · · · · · · · · · · · ·	— Other opening	

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 25 of 52

Case number (if known)

Deptoi	Dai Dai a	Ann Norman		Case III	unibei (ii i		
		oyees Credit Union	Last 4 digits of account number				\$4,693.00
		Forest Road	When was the debt incurred?	9/15/	/16		
		27609-7845 City State Zlp Code	As of the date you file, the claim	is: Check	all that an	ply	
		he debt? Check one.	_	10. 0110011	t dii tilat ap	γ')	
	■ Debtor 1 onl	V	Contingent				
	Debtor 2 only		Unliquidated				
	Debtor 1 and	•	Disputed				
	_	of the debtors and another	Type of NONPRIORITY unsecure Student loans	d claim:			
		s claim is for a community debt	_				
	Is the claim sul		☐ Obligations arising out of a separeport as priority claims	_			
	No		Debts to pension or profit-sharing		and other s	imilar debts	
	Yes		Other. Specify personal I	oan			
	US Dept of Nonpriority Cred	Education/GLELSI	Last 4 digits of account number	mult	iple		\$7,722.00
	PO Box 786		When was the debt incurred?	9/11/	/09		
		/1 53707-7860					
		City State Zlp Code the debt? Check one.	As of the date you file, the claim	is: Check	all that ap	ply	
	■ Debtor 1 only		☐ Contingent				
	_	,	☐ Unliquidated				
	☐ Debtor 2 only	•	Disputed				
	☐ Debtor 1 and	•	Type of NONPRIORITY unsecure	d claim:			
		of the debtors and another	Student loans				
	☐ Check if this Is the claim sul	s claim is for a community debt bject to offset?	Obligations arising out of a separeport as priority claims	aration ag	reement or	divorce that you did not	
	■ No		Debts to pension or profit-sharing	ng plans, a	and other s	imilar debts	
	☐ Yes		Other. Specify				
			student lo	ans			
Part 3:	List Others	s to Be Notified About a Debt	That You Already Listed				
trying t more t	to collect from y han one credito	you for a debt you owe to someor	ut your bankruptcy, for a debt that you le else, list the original creditor in Pa ed in Parts 1 or 2, list the additional age.	rts 1 or 2	2, then list	the collection agency here. Sir	milarly, if you have
	d Address		n which entry in Part 1 or Part 2 did you	list the o	riginal cred	itor?	
			ne 4.1 of (Check one):	Part 1:	Creditors v	vith Priority Unsecured Claims	
	bemarie Dri peake, VA 2	ve Ste 200B	I	Part 2:	Creditors v	vith Nonpriority Unsecured Claim	iS
Onesa	peake, VA Z		st 4 digits of account number				
Name an	d Address	Ω	n which entry in Part 1 or Part 2 did you	list the o	riginal cred	itor?	
	er & Glasser			_	•	vith Priority Unsecured Claims	
	Center, Sui			Part 2:	Creditors v	vith Nonpriority Unsecured Claim	ıS
Norfoll	k, VA 23510		st 4 digits of account number				
		La	ist 4 digits of account number				
Part 4:	Add the Ar	nounts for Each Type of Uns	ecured Claim				
	he amounts of o	certain types of unsecured claims	. This information is for statistical re	porting p	ourposes o	only. 28 U.S.C. §159. Add the ar	nounts for each type
						Total Claim	
	6a.	Domestic support obligations		6a.	\$	0.00	
Total cla		Taxes and certain other debts y	ou owe the government	6b.	\$	0.00	
	6c.	Claims for death or personal inj	-	6c.	\$	0.00	
	6d.	Other. Add all other priority unsec	ured claims. Write that amount here.	6d.	\$	0.00	

Filed 02/05/19 Entered 02/05/19 17:42:00 Case 19-70454-SCS Doc 1 Desc Main Document Page 26 of 52

Debtor 1 Barbara Ann Norman

6e. Total Priority. Add lines 6a through 6d. 6e. 0.00 **Total Claim** Student loans 6f. 7,722.00 Obligations arising out of a separation agreement or divorce that you 0.00 6g. did not report as priority claims 0.00

Total claims from Part 2 6f. 6g. 6h. Debts to pension or profit-sharing plans, and other similar debts 6h. 6i. Other. Add all other nonpriority unsecured claims. Write that amount here.

Total Nonpriority. Add lines 6f through 6i.

14,139.00 21,861.00

Case number (if known)

6j.

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

		Doddine	1 446 21 01 02	
Fill in this infor	mation to identify your	case:		
Debtor 1	Barbara Ann Nor	man		
	First Name	Middle Name	Last Name	
Debtor 2				
(Spouse if, filing)	First Name	Middle Name	Last Name	
United States Ba	ankruptcy Court for the:	EASTERN DISTRICT C	OF VIRGINIA	
Case number				
(if known)				

Official Form 106G

Schedule G: Executory Contracts and Unexpired Leases

12/15

Be as complete and accurate as possible. If two married people are filing together, both are equally responsible for supplying correct information. If more space is needed, copy the additional page, fill it out, number the entries, and attach it to this page. On the top of any additional pages, write your name and case number (if known).

- 1. Do you have any executory contracts or unexpired leases?
 - □ No. Check this box and file this form with the court with your other schedules. You have nothing else to report on this form.
 - Yes. Fill in all of the information below even if the contacts of leases are listed on Schedule A/B:Property (Official Form 106 A/B).
- List separately each person or company with whom you have the contract or lease. Then state what each contract or lease is for (for example, rent, vehicle lease, cell phone). See the instructions for this form in the instruction booklet for more examples of executory contracts and unexpired leases.

P	erson or company with whom you have the contract or lease Name, Number, Street, City, State and ZIP Code	State what the contract or lease is for
2.1	Progressive Leasing 256 West Data Drive Draper, UT 84020	Lease to own mattress and fireplace
2.2	Ramon Republica 7136 Hunters Chase Norfolk, VA 23518	residential lease - debtor is tenant

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

		Docume	nt Page 28 c	of 52	
Fill in this	s information to identify you	r case:			
Debtor 1	Barbara Ann No	rman			
	First Name	Middle Name	Last Name		
Debtor 2 (Spouse if, fi	ling) First Name	Middle Name	Last Name		
United Sta	ates Bankruptcy Court for the:	EASTERN DISTRICT O	F VIRGINIA		
Case num	ohor				
(if known)				☐ Check if this is an amended filing	
Officia	al Form 106H				
Sched	dule H: Your Cod	lebtors		12	2/15
people are fill it out, a your name	e filing together, both are eq	ually responsible for supple boxes on the left. Attack n). Answer every question	olying correct information the Additional Page (as complete and accurate as possible. If two marriation. If more space is needed, copy the Additional to this page. On the top of any Additional Pages, we as a codebtor.	Page,
■ No □ Ye					
ште	:5				
	thin the last 8 years, have yona, California, Idaho, Louisian			ory? (Community property states and territories include hington, and Wisconsin.)	;
■ No	o. Go to line 3.				
☐ Ye	es. Did your spouse, former sp	ouse, or legal equivalent live	e with you at the time?		
in lin Form	e 2 again as a codebtor only	if that person is a guaran	tor or cosigner. Make	or if your spouse is filing with you. List the person is sure you have listed the creditor on Schedule D (0106G). Use Schedule D, Schedule E/F, or Schedule	Official
	Column 1: Your codebtor Name, Number, Street, City, State and	ZIP Code		Column 2: The creditor to whom you owe the Check all schedules that apply:	debt
3.1				☐ Schedule D, line	
0.1	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			-	
	City	State	ZIP Code		
3.2				☐ Schedule D, line	
<u> </u>	Name			☐ Schedule E/F, line	
				☐ Schedule G, line	
	Number Street			_	

State

City

ZIP Code

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 29 of 52

Fill in this informati	on to identify your case:	
Debtor 1	Barbara Ann Norman	
Debtor 2 (Spouse, if filing)		
United States Bank	cruptcy Court for the: EASTERN DISTRICT OF VIRGINIA	
Case number		Check if this is:
(If known)		☐ An amended filing
		A supplement showing postpetition chapter 13 income as of the following date:
Official For	<u>m 106l</u>	MM / DD/ YYYY
Schedule	I: Your Income	12/15
•	d accurate as possible. If two married people are filing together (I	,, , , , ,

Be as complete and accurate as possible. If two married people are filing together (Debtor 1 and Debtor 2), both are equally responsible for supplying correct information. If you are married and not filing jointly, and your spouse is living with you, include information about your spouse. If you are separated and your spouse is not filing with you, do not include information about your spouse. If more space is needed, attach a separate sheet to this form. On the top of any additional pages, write your name and case number (if known). Answer every question.

Part	1: Describe Employment			
1.	Fill in your employment information.		Debtor 1	Debtor 2 or non-filling spouse
	If you have more than one job,	Franksim and adatus	■ Employed	☐ Employed
	attach a separate page with information about additional	Employment status	☐ Not employed	■ Not employed
	employers.	Occupation	Teacher	
	Include part-time, seasonal, or self-employed work.	Employer's name	Hertford County Public Schools	
	Occupation may include student or homemaker, if it applies.	Employer's address	701 N. Martin Street Winton, NC 27980-6000	
		How long employed th	ere? 6 years	
Pari	2: Give Details About Mon	thly Income		

Estimate monthly income as of the date you file this form. If you have nothing to report for any line, write \$0 in the space. Include your non-filing spouse unless you are separated.

If you or your non-filing spouse have more than one employer, combine the information for all employers for that person on the lines below. If you need more space, attach a separate sheet to this form.

List monthly gross wages, salary, and commissions (before all payroll deductions). If not paid monthly, calculate what the monthly wage would be.

3. Estimate and list monthly overtime pay.

4. Calculate gross Income. Add line 2 + line 3.

Debtor 2 or -filing spouse		For Debtor 1		
0.00	\$	4,391.00	\$	2.
0.00	+\$	0.00	+\$	3.
0.00	\$	4,391.00	\$	4.

Official Form 106I Schedule I: Your Income page 1

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 30 of 52

Deb	otor 1	Barbara Ann Norman		C	Case r	number (if known)				
					For	Debtor 1		Debtor filing s	2 or spouse	
	Cop	y line 4 here	4.		\$	4,391.00	\$		0.00	_
5.	l ist	all payroll deductions:								
Ů.	5a.	Tax, Medicare, and Social Security deductions	5a	a	\$	709.00	\$		0.00	1
	5b.	Mandatory contributions for retirement plans	5b		\$	0.00	\$		0.00	
	5c.	Voluntary contributions for retirement plans	50) .	\$	313.00	\$		0.00	
	5d.	Required repayments of retirement fund loans	50	d.	\$	0.00	\$		0.00	<u>)</u>
	5e.	Insurance	5e		\$	90.00	\$		0.00	
	5f.	Domestic support obligations	5f.		\$	0.00	\$		0.00	
	5g. 5h.	Union dues Other deductions. Specify: Life Ins	5g 5h). 1.+	\$	0.00 87.00	* + \$		0.00	
	511.	SCBE			_{\$} —	25.00	`\$ <u> </u>		0.00	_
6.	Δda	the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h.	6.		\$	1,224.00	\$ 		0.00	_
		culate total monthly take-home pay. Subtract line 6 from line 4.	7.		Ψ — \$		\$ 			_
7.			7.		Φ	3,167.00	Φ		0.00	<u>, </u>
8.	List 8a.	all other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total monthly net income.	88	a	\$	0.00	\$		0.00	1
	8b.	Interest and dividends	8b		\$	0.00	\$		0.00	
	8c.	Family support payments that you, a non-filing spouse, or a depending regularly receive Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement.	lent 80).	\$	0.00	\$		0.00	_
	8d.	Unemployment compensation	80		\$ —	0.00	\$		0.00	
	8e.	Social Security	8e	€.	\$	0.00	\$	1,	300.00	
	8f.	Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistathat you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify:			\$	0.00	\$		0.00	<u> </u>
	8g.	Pension or retirement income	8g		\$ 	0.00	\$		500.00	_
	8h.	Other monthly income. Specify: Net Supp pay pro rated			\$		+ \$		0.00	
9.	Add	all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h.	9.	\$	S	112.00	\$	1	,800.0	00
4.0	٠.						4.0			
10.		culate monthly income. Add line 7 + line 9. the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse.	10.	Ъ_	3	3,279.00 + \$_	1,8	00.00	= 5 _	5,079.00
11.	Inclionation of the other of th	te all other regular contributions to the expenses that you list in Schedude contributions from an unmarried partner, members of your household, your friends or relatives. not include any amounts already included in lines 2-10 or amounts that are cify:	your dep			•		Schedul 11.		0.00
12.		the amount in the last column of line 10 to the amount in line 11. The e that amount on the Summary of Schedules and Statistical Summary of Cies						12.	\$	5,079.00
13.	Do :	you expect an increase or decrease within the year after you file this fo	orm?						Comb	ined nly income
		No. Ves Evolain:								

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 31 of 52

	in this informa-	tion to identify									
FIII	in this informa	tion to identify yo	our case:								
Deb	tor 1	Barbara Ann	Norman	<u> </u>		_	eck if this				
Deb	tor 2					☐ An amended filing☐ A supplement showing postpetition chapter					
	ouse, if filing)								the following date:		
Unit	ed States Bankro	uptcy Court for the:	EASTE		MM / DI	O / YYYY					
Cas	e number										
(If kr	nown)										
Of	fficial Fo	rm 106J									
Sc	chedule	J: Your I	Exper	ises					12/1	5	
Be info	as complete a ormation. If m mber (if know	and accurate as ore space is ne n). Answer ever	possible eded, atta y questio	. If two married people and the control of the cont							
Par 1.	t 1: Descr Is this a join	ibe Your House	hold							_	
١.	No. Go to										
			in a separ	ate household?							
	□ No		a copa								
			st file Offic	ial Form 106J-2, Expenses	s for Separate House	ehold of D	ebtor 2.				
•	D										
2.	•	e dependents?	■ No								
	Do not list Do and Debtor 2		☐ Yes.	Fill out this information for each dependent	Dependent's relation Debtor 1 or Debtor		Depe age	endent's	Does dependent live with you?		
	Do not state								□ No		
	dependents	names.							☐ Yes		
									□ No □ Yes		
									□ No		
									☐ Yes		
									□ No		
	_								☐ Yes		
3.	expenses of	enses include f people other tl d your depender	han $_{f \Box}$	No Yes							
Par		ate Your Ongoi									
ехр				uptcy filing date unless y y is filed. If this is a supp)	
the	value of such	n assistance and		government assistance i				V			
(Off	ficial Form 10	6I.)						Your exp	enses		
4.		or home owners		ses for your residence. I or lot.	nclude first mortgag	e 4.	\$		1,000.00		
	If not includ	led in line 4:									
	4a. Real e	state taxes				4a.	\$		0.00		
	•	rty, homeowner's				4b.	:		0.00		
				upkeep expenses		4c.			0.00		
5.		owner's associat nortgage payme		dominium dues our residence, such as ho	me equity loans	4d. 5.			0.00		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 32 of 52

oara Ann Norman	Case num	iber (if known)	
tricity, heat, natural gas	6a.	\$	258.00
· · · · · · · · · · · · · · · · · · ·			55.00
			45.00
r. Specify:	6d.	\$	0.00
housekeeping supplies		\$	400.00
			0.00
aundry, and dry cleaning	9.		140.00
· · · · · · · · · · · · · · · · · · ·	10.	\$	50.00
•		:	10.00
ation. Include gas, maintenance, bus or train fare.	40	•	325.00
		·	95.00
		· -	
•	14.	Ф	0.00
	15a	\$	0.00
		· ·	0.00
		·	378.00
			0.00
		Ψ	0.00
not morage taxes deducted from your pay of included in lines 4 of 20.	16	\$	0.00
t or lease payments:		·	3.00
	17a.	\$	537.00
payments for Vehicle 2	17b.	\$	0.00
r. Specify: Progressive Leasing	17c.	\$	125.00
	17d.	\$	112.00
nents of alimony, maintenance, and support that you did not report as			
from your pay on line 5, Schedule I, Your Income (Official Form 106I).	18.	\$	0.00
ments you make to support others who do not live with you.		\$	0.00
	19.		
		· ·	0.00
		·	0.00
		·	0.00
		· -	0.00
eowner's association or condominium dues	20e.	\$	0.00
ecify: Contingencies	21.	+\$	175.00
spouses med bills		+\$	75.00
		+\$	1,300.00
your monthly expenses			
,		\$	5,080.00
		\$	-,
		\$	5,080.00
			3,000.00
•	0.5	•	.
· · · · · · · · · · · · · · · · · · ·			5,079.00
your monthly expenses from line 22c above.	23b.	-\$	5,080.00
ract your monthly expenses from your monthly income		1	
ract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$	-1.00
ract your monthly expenses from your monthly income. result is your monthly net income.	23c.	\$	-1.00
result is your monthly net income. pect an increase or decrease in your expenses within the year after your on your expect to finish paying for your car loan within the year or do you expect your m	u file this	s form?	
result is your <i>monthly net income.</i> pect an increase or decrease in your expenses within the year after yo	u file this	s form?	
	from your pay on line 5, Schedule I, Your Income (Official Form 106I). ments you make to support others who do not live with you. property expenses not included in lines 4 or 5 of this form or on Schegages on other property estate taxes erty, homeowner's, or renter's insurance itenance, repair, and upkeep expenses eowner's association or condominium dues	tricity, heat, natural gas er, sewer, garbage collection phone, cell phone, Internet, satellite, and cable services er. Specify: housekeeping supplies and children's education costs and children's education costs and dhildren's education costs and dhildren's education costs and dental expenses ation. Include gas, maintenance, bus or train fare. ude car payments. lent, clubs, recreation, newspapers, magazines, and books contributions and religious donations lude insurance deducted from your pay or included in lines 4 or 20. surance loi insurance loi insurance loi insurance loi insurance. loi	tricity, heat, natural gas r, sewer, garbage collection phone, cell phone, Internet, satellite, and cable services r. Specify: housekeeping supplies r. Specify: housekeeping supplies and children's education costs aundry, and dry cleaning are products and services did dental expenses ation. Include gas, maintenance, bus or train fare. ude car payments. the cereation, newspapers, magazines, and books contributions and religious donations the insurance deducted from your pay or included in lines 4 or 20. Insurance r insurance. Specify: not include taxes deducted from your pay or included in lines 4 or 20. t or lease payments: anyments for Vehicle 1 17a. \$ 17b. \$ 17c. \$ 17c. \$ 17c. \$ 17d.

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 33 of 52

							•
Fill in th	his inform	ation to identify your	case:				
Debtor 1	1	Barbara Ann Nori	man				
200101		First Name	Middle Name	La	st Name		
Debtor 2	2						
(Spouse if,	f, filing)	First Name	Middle Name	La	st Name		
United S	States Banl	kruptcy Court for the:	EASTERN DISTRICT	OF VIRGINI	A		
Case nu	ımher						
(if known)							☐ Check if this is an
							amended filing
Officia	al Form	106Dec					
Dec	larati	on About a	n Individua	I Debt	or's Sche	edules	12/15
	- ara		······································		<u> </u>		12/13
If two m	arried peo	pole are filing togethe	r, both are equally res	nonsible for	supplying correct	t information.	
		pro and many regerner	,,,,,	, , , , , , , , , , , , , , , , , , , ,			
							atement, concealing property, or
		or property by fraud ii U.S.C. §§ 152, 1341, 1		inkruptcy ca	se can result in fi	nes up to \$250,	000, or imprisonment for up to 20
years, or	i botii. io	0.3.6. 99 132, 1341, 1	519, and 5571.				
	Sign	Below					
	_						
Dio	d you pay	or agree to pay some	one who is NOT an att	orney to hel	you fill out bank	cruptcy forms?	
		. ,		•	•	. ,	
	No						
П	Yes. Na	ame of person				Attach Ba	nkruptcy Petition Preparer's Notice,
_							on, and Signature (Official Form 119)
Une	dar nanaltı	of pariury I dealers	that I have read the su	ımmarı, and	achadulaa filad w	ith this doclars	tion and
		true and correct.	mat i nave reau me st	illilliai y aliu	scriedules illed w	illi lilis ueciara	uon and
X		ara Ann Norman		Х			
		Ann Norman			Signature of Deb	otor 2	
	Signature	of Debtor 1					
	Date Fe	ebruary 5, 2019			Date		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 34 of 52

Fill	in this inforn	nation to identify you	r case:			
De	btor 1	Barbara Ann No	rman			
_		First Name	Middle Name	Last Name		
	btor 2 ouse if, filing)	First Name	Middle Name	Last Name		
Un	ited States Ba	nkruptcy Court for the:	EASTERN DISTRICT OF	VIRGINIA		
Co	se number					
_	nown)					theck if this is an mended filing
					a	mended hiing
\sim 1	Kisial Es	waa 407				
	ficial Fo		Affaira far Individ	luele Filipe for D		
<u>St</u>	atement	of Financial A	Affairs for Individ	uals Filing for B	ankruptcy	4/16
					equally responsible for sup y additional pages, write yo	
		n). Answer every que		с с ше сер с. с	y anamona pagos, mio yo	
Pa	rt 1: Give D	Details About Your Ma	rital Status and Where You	Lived Before		
1.	What is you	r current marital statu	ıs?			
	_					
	■ Married□ Not mar	riod				
	□ NOU IIIai	neu				
2.	During the la	ast 3 years, have you	lived anywhere other than	where you live now?		
	■ No					
	☐ Yes. Lis	t all of the places you l	ived in the last 3 years. Do no	ot include where you live nov	V.	
	Debtor 1 Pr	ior Address:	Dates Debtor 1 lived there	Debtor 2 Prior Ad	dress:	Dates Debtor 2 lived there
3.	Within the la	ast 8 years, did you ev	ver live with a spouse or leg	gal equivalent in a commu	nity property state or territor	y? (Community property
stat	es and territori	es include Arizona, Ca	lifornia, Idaho, Louisiana, Ne	vada, New Mexico, Puerto R	ico, Texas, Washington and V	Visconsin.)
	■ No					
	☐ Yes. Ma	ike sure you fill out Sci	hedule H: Your Codebtors (Of	fficial Form 106H).		
Da	rt 2 Explai	n the Sources of You	r Incomo			
га	Ехріаі	in the Sources of Tou	i ilicollie			
4.	Fill in the tota	al amount of income yo	nployment or from operating a received from all jobs and a have income that you received.	all businesses, including part		ndar years?
	_ N		·			
	☐ No Fill	in the details.				
	— 163.1111	in the details.				
			Debtor 1	Q	Debtor 2	0
			Sources of income Check all that apply.	Gross income (before deductions and	Sources of income Check all that apply.	Gross income (before deductions
_				exclusions)	_	and exclusions)
		of current year until d for bankruptcy:	■ Wages, commissions, bonuses, tips	\$4,833.00	☐ Wages, commissions, bonuses, tips	
			☐ Operating a business		Operating a business	

Official Form 107

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document

Page 35 of 52 Case number (# known) Debtor 1 Barbara Ann Norman

				Debtor 1		Debtor 2		
				Sources of income Check all that apply.	Gross income (before deductions and exclusions)	Sources of inc Check all that a		Gross income (before deductions and exclusions)
For last calendar year: (January 1 to December 31, 2018)		■ Wages, commissions, bonuses, tips	\$50,258.00	☐ Wages, combonuses, tips	imissions,			
				☐ Operating a business		☐ Operating a	business	
		dar year be December		■ Wages, commissions, bonuses, tips	\$49,278.00	☐ Wages, combonuses, tips	missions,	
				☐ Operating a business		☐ Operating a	business	
	unemploy gambling List each	ment, and o and lottery v	ther public be vinnings. If ye the gross inc	her that income is taxable. Execute that income is taxable. Execute that payments; pensions; responsive the properties and your separate that the properties is a source separate.	ntal income; interest; divider ou have income that you red	nds; money collecte ceived together, list	ed from laws it only once	suits; royalties; and
				Debtor 1		Debtor 2		
				Sources of income Describe below.	Gross income from each source (before deductions and exclusions)	Sources of inc Describe below		Gross income (before deductions and exclusions)
6.	□ No.	Neither De individual During the No. Yes * Subject	ebtor 1 nor I primarily for a 90 days bef Go to line List below paid that c not include to adjustmer or Debtor 2 o 90 days bef Go to line List below include pay	each creditor to whom you pai reditor. Do not include paymer payments to an attorney for the ton 4/01/19 and every 3 year or both have primarily consu- pre you filed for bankruptcy, di	Imer debts. Consumer debtld purpose." d you pay any creditor a total d a total of \$6,425* or more this for domestic support oblinis bankruptcy case. Is after that for cases filed on timer debts. d you pay any creditor a total d a total of \$600 or more and total disputation.	in one or more par gations, such as con or after the date of all of \$600 or more.	ore? yments and hild support of adjustmer you paid the	the total amount you and alimony. Also, do nt.
	Creditor	's Name an	d Address	Dates of payme	nt Total amount	Amount you still owe	Was this	payment for
		Mart inby Stree , VA 23510			\$1,200.00	\$638.00		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 36 of 52 Case number (if known)

7.	Within 1 year before you filed for bankruptcy, did you make a payment on a debt you owed anyone who was an insider? Insiders include your relatives; any general partners; relatives of any general partners; partnerships of which you are a general partner; corporations of which you are an officer, director, person in control, or owner of 20% or more of their voting securities; and any managing agent, including one for a business you operate as a sole proprietor. 11 U.S.C. § 101. Include payments for domestic support obligations, such as child support and alimony.					
	■ No					
	☐ Yes. List all payments to an insider.					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for this payment	
8.	Within 1 year before you filed for bankruptcy, did you make any payments or transfer any property on account of a debt that benefited an insider? Include payments on debts guaranteed or cosigned by an insider.					
	■ No					
	☐ Yes. List all payments to an insider					
	Insider's Name and Address	Dates of payment	Total amount paid	Amount you still owe	Reason for Include credi	this payment tor's name
Par	t 4: Identify Legal Actions, Repossession	s, and Foreclosures				
9.	Within 1 year before you filed for bankruptcy, were you a party in any lawsuit, court action, or administrative proceeding? List all such matters, including personal injury cases, small claims actions, divorces, collection suits, paternity actions, support or custody modifications, and contract disputes. No Yes. Fill in the details.					
	Case title Case number	Nature of the case	Court or agency		Status of the case	
	Ally Financial Inc. c/o Glasser & Glasser v. Barbara Norman GV18008627	garnishment summons	Chesapeake General District Co 307 Albemarle Drive Ste 200B Chesapeake, VA 23322		■ Pending □ On appeal □ Concluded	
10.	Within 1 year before you filed for bankrupto Check all that apply and fill in the details below ☐ No. Go to line 11. ☐ Yes. Fill in the information below.		erty repossessed, f	oreclosed, garni	shed, attached	I, seized, or levied?
	Creditor Name and Address	Describe the Property	Describe the Property			Value of the
		Fundatu sub at hannon ad			prope	
	Ally Financial	Explain what happened BB&T Bank Acct		1/20	/2019 \$488	
	P.O. Box 380901 Bloomington, MN 55438-0901	☐ Property was repossessed.				
	Bloomington, with 33430-0301	☐ Property was foreclosed.				
		☐ Property was garnished.				
		Property was attached, seized or levied.				
11.	Within 90 days before you filed for bankruptcy, did any creditor, including a bank or financial institution, set off any amounts from your accounts or refuse to make a payment because you owed a debt? No Yes. Fill in the details.					
	Creditor Name and Address	Describe the action the	creditor took	Date	action was	Amount
				taker	1	

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Page 37 of 52 Document Debtor 1 Barbara Ann Norman Case number (if known) 12. Within 1 year before you filed for bankruptcy, was any of your property in the possession of an assignee for the benefit of creditors, a court-appointed receiver, a custodian, or another official? ☐ Yes Part 5: List Certain Gifts and Contributions 13. Within 2 years before you filed for bankruptcy, did you give any gifts with a total value of more than \$600 per person? Yes. Fill in the details for each gift. Gifts with a total value of more than \$600 Describe the gifts Dates you gave Value the gifts per person Person to Whom You Gave the Gift and Address: 14. Within 2 years before you filed for bankruptcy, did you give any gifts or contributions with a total value of more than \$600 to any charity? ☐ Yes. Fill in the details for each gift or contribution. Gifts or contributions to charities that total Describe what you contributed Dates you Value contributed more than \$600 Charity's Name Address (Number, Street, City, State and ZIP Code) Part 6: List Certain Losses Within 1 year before you filed for bankruptcy or since you filed for bankruptcy, did you lose anything because of theft, fire, other disaster, or gambling? Nο п Yes. Fill in the details. Describe the property you lost and Describe any insurance coverage for the loss Date of your Value of property how the loss occurred loss lost Include the amount that insurance has paid. List pending insurance claims on line 33 of Schedule A/B: Property. Part 7: List Certain Payments or Transfers Within 1 year before you filed for bankruptcy, did you or anyone else acting on your behalf pay or transfer any property to anyone you consulted about seeking bankruptcy or preparing a bankruptcy petition? Include any attorneys, bankruptcy petition preparers, or credit counseling agencies for services required in your bankruptcy. ☐ No Yes. Fill in the details. Person Who Was Paid Description and value of any property **Date payment** Amount of **Address** transferred or transfer was payment **Email or website address** made Person Who Made the Payment, if Not You Harbour Law, P.L.C. Filing Fee \$335, HSD \$28, Attorney 2/1/19 \$1,363.00 500 E. Main Street Fees \$1,000 **Suite 1230** Norfolk, VA 23510

certificate

\$25.00

Credit Counseling Class

1/31/19

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Page 38 of 52 Case number (if known) Document

Debtor 1 Barbara Ann Norman

17.	Within 1 year before you filed for bankruptopromised to help you deal with your credited be not include any payment or transfer that you	ors or to make payment			or transfer any proper	ty to anyone who
	■ No □ Yes. Fill in the details.					
	Person Who Was Paid Address	Description and variansferred	value of any prop	erty	Date payment or transfer was made	Amount of payment
18. Within 2 years before you filed for bankruptcy, did you se transferred in the ordinary course of your business or final Include both outright transfers and transfers made as security include gifts and transfers that you have already listed on this No			airs? the granting of a s			
	Yes. Fill in the details.	5				5
	Person Who Received Transfer Address	Description and v			any property or received or debts change	Date transfer was made
	Person's relationship to you					
19.	Within 10 years before you filed for bankru beneficiary? (These are often called asset-pr ■ No □ Yes. Fill in the details.		ny property to a s	elf-settled tru	ust or similar device o	of which you are a
	Name of trust	Description and v	value of the prope	erty transferr	ed	Date Transfer was made
Par	8: List of Certain Financial Accounts, In	struments, Safe Deposi	it Boxes, and Sto	rage Units		
20.	Within 1 year before you filed for bankrupto sold, moved, or transferred? Include checking, savings, money market, houses, pension funds, cooperatives, asso ■ No ■ Yes. Fill in the details.	or other financial accou	ınts; certificates (of deposit; sh		
	Name of Financial Institution and Address (Number, Street, City, State and ZIP Code)	Last 4 digits of account number	Type of account instrument	clo mo	te account was used, sold, oved, or nsferred	Last balance before closing or transfer
21.	Do you now have, or did you have within 1 cash, or other valuables?	year before you filed fo	r bankruptcy, any	/ safe deposi	t box or other deposi	tory for securities,
	■ No □ Yes. Fill in the details.					
	Name of Financial Institution Address (Number, Street, City, State and ZIP Code)	Who else had acc Address (Number, S State and ZIP Code)		Describe the (contents	Do you still have it?
22.	Have you stored property in a storage unit	or place other than you	r home within 1 y	ear before yo	ou filed for bankruptc	y?
	■ No					
	Yes. Fill in the details.					
	Name of Storage Facility Address (Number, Street, City, State and ZIP Code)	Who else has or to it? Address (Number, S State and ZIP Code)		Describe the (contents	Do you still have it?

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Page 39 of 52 Case number (if known) Document

Debtor 1 Barbara Ann Norman

Par	t 9:	Identify Property You Hold or Control for	Someone Else				
23.	3. Do you hold or control any property that someone else owns? Include any property you borrowed from, are storing for, or hold in trust for someone.						
		No Yes. Fill in the details.					
	Owner's Name Address (Number, Street, City, State and ZIP Code) Where is the property? (Number, Street, City, State and ZIP Code) Code) Describe the property Va						
Par	t 10:	Give Details About Environmental Inform	nation				
For	the	ourpose of Part 10, the following definitions	s apply:				
	toxi	rironmental law means any federal, state, or ic substances, wastes, or material into the a ulations controlling the cleanup of these su	air, land, soil, surface water, grou	_			
		means any location, facility, or property as own, operate, or utilize it, including disposa		I law	, whether you now own, operate,	or utilize it or used	
	Haz	cardous material means anything an enviror ardous material, pollutant, contaminant, or	nmental law defines as a hazardou	ıs wa	aste, hazardous substance, toxic	substance,	
Rep	ort a	ıll notices, releases, and proceedings that y	ou know about, regardless of who	en th	ey occurred.		
24.	Has	any governmental unit notified you that yo	ou may be liable or potentially liab	le un	der or in violation of an environn	nental law?	
		No					
		Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State at ZIP Code)	nd	Environmental law, if you know it	Date of notice	
25.	Hav	re you notified any governmental unit of any	y release of hazardous material?				
		No Yes. Fill in the details.					
		me of site dress (Number, Street, City, State and ZIP Code)	Governmental unit Address (Number, Street, City, State an ZIP Code)	nd	Environmental law, if you know it	Date of notice	
26.	Hav	re you been a party in any judicial or admini	istrative proceeding under any en	viron	nmental law? Include settlements	and orders.	
		No					
		Yes. Fill in the details.					
		se Title se Number	Court or agency Name Address (Number, Street, City, State and ZIP Code)	Na	ature of the case	Status of the case	
Par	t 11:	Give Details About Your Business or Cor	nnections to Any Business				
27.	Wit	hin 4 years before you filed for bankruptcy.	did you own a business or have a	anv o	of the following connections to an	v business?	
	 Within 4 years before you filed for bankruptcy, did you own a business or have any of the following connections to any business? A sole proprietor or self-employed in a trade, profession, or other activity, either full-time or part-time 						
		☐ A member of a limited liability company			•		
		☐ A partner in a partnership	,	. `	. ,		
	☐ An officer, director, or managing executive of a corporation						

☐ An owner of at least 5% of the voting or equity securities of a corporation

Entered 02/05/19 17:42:00 Case 19-70454-SCS Doc 1 Filed 02/05/19 Page 40 of 52 Document Debtor 1 Barbara Ann Norman Case number (if known) No. None of the above applies. Go to Part 12. Yes. Check all that apply above and fill in the details below for each business. Describe the nature of the business **Employer Identification number Business Name** Address Do not include Social Security number or ITIN. (Number, Street, City, State and ZIP Code) Name of accountant or bookkeeper Dates business existed **Brushstrokes by Barbara** EIN: Art From-To 2007-present Within 2 years before you filed for bankruptcy, did you give a financial statement to anyone about your business? Include all financial institutions, creditors, or other parties. No Yes. Fill in the details below. **Date Issued** Name **Address** (Number, Street, City, State and ZIP Code) Part 12: Sign Below I have read the answers on this Statement of Financial Affairs and any attachments, and I declare under penalty of perjury that the answers are true and correct. I understand that making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571. /s/ Barbara Ann Norman Signature of Debtor 2 Barbara Ann Norman Signature of Debtor 1 **Date** Date February 5, 2019 Did you attach additional pages to Your Statement of Financial Affairs for Individuals Filing for Bankruptcy (Official Form 107)?

Did you pay or agree to pay someone who is not an attorney to help you fill out bankruptcy forms?

Yes, Name of Person . Attach the Bankruptcy Petition Preparer's Notice, Declaration, and Signature (Official Form 119).

Official Form 107

■ No
□ Yes

■ No

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 41 of 52

Fill in this infor	rmation to identify your	case:		
Debtor 1	Barbara Ann Nor			
Debtor 2	First Name	Middle Name	Last Name	
(Spouse if, filing)	First Name	Middle Name	Last Name	—
United States Ba	ankruptcy Court for the:	EASTERN DISTR	RICT OF VIRGINIA	
Case number (if known)				☐ Check if this is an amended filing
Official Fo		n for Indiv	viduals Filing Under Cha	apter 7 12/15
creditors have lease You must file the	ever is earlier, unless th	our property, or and the lease has r vithin 30 days after		
	eople are filing togethe	r in a joint case, be	oth are equally responsible for supplying co	orrect information. Both debtors must
Part 1: List Y 1. For any credit information b	our name and case nui our Creditors Who Hav tors that you listed in P	nber (if known). e Secured Claims art 1 of Schedule D	s needed, attach a separate sheet to this for the second of the second o	Property (Official Form 106D), fill in the
			secures a debt?	as exempt on Schedule (
Creditor's (Grand Brands		☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property securing debt			■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes
Creditor's L	₋oan Smart		Surrender the property.Retain the property and redeem it.	□ No
Description of property securing debt	Broken, needs nev		 □ Retain the property and redeem it. □ Retain the property and enter into a Reaffirmation Agreement. □ Retain the property and [explain]: 	■ Yes
Creditor's name:	Nissan Motor Accept	ance	☐ Surrender the property. ☐ Retain the property and redeem it.	□ No
Description of property	f 2015 Nissan Rogu miles	e 100,000	■ Retain the property and enter into a Reaffirmation Agreement.□ Retain the property and [explain]:	■ Yes

Official Form 108

Statement of Intention for Individuals Filing Under Chapter 7

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 42 of 52

Deb	otor 1	Barbara A	Ann Norman	Cas	e number (if known)	
S	ecuring	debt:				
Pari	t 2: L	ist Your U	nexpired Personal Property Lease	 2 S		
For a	any und e infor	expired per mation bel	sonal property lease that you list ow. Do not list real estate leases.	ed in Schedule G: Executory Contra	cts and Unexpired Leases (Official Form 106G e still in effect; the lease period has not yet end 1 U.S.C. § 365(p)(2).	
Des	scribe y	our unexp	ired personal property leases		Will the lease be assumed?	
Les	sor's na	ame:	Progressive Leasing		□ No	
					■ Yes	
	scription perty:	of leased	Lease to own mattress and f	ïreplace		
Pari	t 3:	Sign Below				
	•	, ,	rry, I declare that I have indicated t to an unexpired lease.	my intention about any property of	my estate that secures a debt and any persona	al
X	/s/ Ba	arbara An	n Norman	X	or 2	
		ara Ann N ture of Debt		Signature of Debt	or 2	
	Date	Febru	ary 5, 2019	Date		

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main

Document Page 43 of 52 United States Bankruptcy Court

Eastern District of Virginia

In re	Barbara Ann Norman			
		Debtor(s)	Chapter	7

	DISCLOSURE OF COMPENSATION OF ATTORNEY FOR DEBTOR
1.	Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 2016(b), I certify that I am the attorney for the above-named debtor(s) and that compensation paid to me, for services rendered or to be rendered on behalf of the debtor(s) in contemplation of or in connection with the bankruptcy case is as follows:
	For legal services, I have agreed to accept \$ 1,000.00
	Prior to the filing of this statement I have received \$ 1,000.00
	Balance Due \$ 0.00
2.	The source of the compensation paid to me was:
	■ Debtor □ Other (specify)
3.	The source of compensation to be paid to me is:
	■ Debtor □ Other (specify)
4.	■ I have not agreed to share the above-disclosed compensation with any other person unless they are members and associates of my law firm.
	☐ I have agreed to share the above-disclosed compensation with a person or persons who are not members or associates of my law firm. A copy of the agreement, together with a list of the names of the people sharing in the compensation, is attached.
5.	 In return for the above-disclosed fee, I have agreed to render legal service for all aspects of the bankruptcy case, including: a. Analysis of the debtor's financial situation, and rendering advice to the debtor in determining whether to file a petition in bankruptcy; b. Preparation and filing of any petition, schedules, statement of affairs and plan which may be required; c. Representation of the debtor at the meeting of creditors and confirmation hearing, and any adjourned hearings thereof; d. Other provisions as needed: ATTORNEY FEE INCLUDES: Exemption planning; preparation and filing of reaffirmation agreements and applications as needed; representation of the debtors in any relief from stay actions.
6.	By agreement with the debtor(s), the above-disclosed fee does not include the following services: ATTORNEY FEE EXCLUDES: Representation of Debtor(s) in obtaining remedies or enforcement of rights based upon non-bankruptcy law; or representation in any forum outside of the U.S. Bankruptcy Court are specifically excluded as are adversary proceedings, appeals and objections to discharge.
	A . () 11 4 D 14 () 4 11 1 D O 1 4 4 1 1 1 1 1 1 1

Any funds paid by the Debtor(s) to Harbour Law PLC prior to the case filing are disclosed at paragraph 16 of the Statement of Financial Affairs and applied, if applicable, first to payment of Bankruptcy Court filing fee, then to the Circuit Court homestead deed filing fee, and finally to fees.

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 44 of 52

CERTIFICATION

I certify that the foregoing is a complete statement of any agreement or arrangement for payment to me for representation of the debtor(s) in this bankruptcy proceeding.

February 5, 2019	/s/ Dana S. Power
Date	Dana S. Power 33101
	Signature of Attorney
	Harbour Law, P.L.C
	Name of Law Firm
	500 E. Plume St.
	Suite 801
	Norfolk, VA 23510
	757-622-1621 Fax: 757-623-3250

For use in Chapter 13 Cases where Fees Requested Not in Excess of \$5,223 (For all Cases Filed on or after 01/01/2018)

NOTICE TO DEBTOR(S), STANDING CHAPTER 13 TRUSTEE AND UNITED STATES TRUSTEE PURSUANT TO LOCAL BANKRUPTCY RULE 2016-1(C) AND CLERK'S CM/ECF POLICY 9

Notice is hereby given that pursuant to Local Bankruptcy Rule 2016-1(C), you must file an objection with the court to the fees requested in this disclosure of compensation opposing said fees in their entirety, or in a specific amount, no later than the last day for filing objections to confirmation of the chapter 13 plan.

PROOF OF SERVICE

	s date the foregoing Notice was served upon the debtor(s), the standing Chapter 13 trusted 016-1(C) and the Clerk's CM/ECF Policy 9, either electronically or in paper form (first class
Date	Signature of Attorney

Fill in this info	ormation to identify your case:					lirected in	this form and	in Form
Debtor 1	Barbara Ann Norman		122	2A-1Sup	pp:			
Debtor 2 (Spouse, if filing)			•	■ 1. Th	ere is no pres	umption (of abuse	
United States	Bankruptcy Court for the: Eastern District of	Virginia	_ [ap	oplies will be r	nade und	er Chapter 7 I	nption of abuse Means Test
Case number	•				alculation (Off		,	
(II KIIOWII)							apply now be but it could ap	
				□ Che	ck if this is a	n amen	ded filing	
Official I	Form 122A - 1							
Chapte	7 Statement of Your Cur	rent Moi	nthly Inc	ome	•			12/1
separate sheet number (if know military service Part 1: 1. What is Not r	and accurate as possible. If two married people are to this form. Include the line number to which the a nyn. If you believe that you are exempted from a pre, complete and file Statement of Exemption from Proceedings of the Colombia Statement of the Colombia Sta	dditional informa sumption of abu resumption of Ab	ation applies. On ise because you buse Under § 707	the top do not h '(b)(2) (O	of any addition ave primarily c	al pages, v onsumer o	write your name	e and case se of qualifying
_	ied and your spouse is filing with you. Fill ou			2-11.				
■ Marr	ied and your spouse is NOT filing with you.	fou and your	spouse are:					
■ Liv	ring in the same household and are not lega	Ily separated.	Fill out both Co	lumns /	A and B, lines	2-11.		
pe	ring separately or are legally separated. Fill of enalty of perjury that you and your spouse are leading apart for reasons that do not include evading apart.	egally separated	d under nonban	kruptcy	law that appli	es or that		
101(10A). Fo 6 months, ac	rerage monthly income that you received from all so or example, if you are filing on September 15, the 6-mod do the income for all 6 months and divide the total by 6. ntal property, put the income from that property in one of	nth period would be Fill in the result. I	be March 1 throug Do not include any	h August / income	31. If the amou amount more the	nt of your r nan once. F	nonthly income for example, if b	varied during the
				Columi Debtor		Columi Debtor non-fil		
	oss wages, salary, tips, bonuses, overtime, a ll deductions).	and commission	ons (before	\$	4,521.00	\$	0.00	
	y and maintenance payments. Do not include B is filled in.	payments from	a spouse if	\$	0.00	\$	0.00	
of you of from an and roor filled in.	unts from any source which are regularly pa or your dependents, including child support. unmarried partner, members of your household nmates. Include regular contributions from a sp Do not include payments you listed on line 3.	Include regular I, your depende ouse only if Co	r contributions ents, parents,	\$	0.00	\$	0.00	
5. Net inco	ome from operating a business, profession,		otor 1					
C*000 *0	posinto (hoforo all dodustiono)	\$ 0.00	i i					
	eceipts (before all deductions)	-\$ 0.00						
-	and necessary operating expenses withly income from a business, profession, or fare	0.00	Copy here ->	\$	0.00	\$	0.00	
	namy income from a business, profession, or ran ome from rental and other real property	Πφ	F- Je. e P	Ť —		Ť		
O. INCLINIC	one nom remarand other real property	Deb	otor 1					
Gross re	eceipts (before all deductions)	\$ 0.00						
	and necessary operating expenses	-\$ 0.00						
-	othly income from rental or other real property	\$ 0.00	Copy here ->	\$	0.00	\$	0.00	

Official Form 122A-1

0.00

7. Interest, dividends, and royalties

0.00

Case 19-70454-SCS Doc 1 Filed 02/05/19 Entered 02/05/19 17:42:00 Desc Main Document Page 46 of 52

Debtor 1 **Barbara Ann Norman** Case number (if known) Column A Column B Debtor 1 Debtor 2 or non-filing spouse 8. Unemployment compensation 0.00 0.00 Do not enter the amount if you contend that the amount received was a benefit under the Social Security Act. Instead, list it here: 0.00 \$ For your spouse 1,300.00 9. Pension or retirement income. Do not include any amount received that was a 0.00 500.00 benefit under the Social Security Act. 10. Income from all other sources not listed above. Specify the source and amount. Do not include any benefits received under the Social Security Act or payments received as a victim of a war crime, a crime against humanity, or international or domestic terrorism. If necessary, list other sources on a separate page and put the total below. 0.00 0.00 0.00 0.00 Total amounts from separate pages, if any. \$ 0.00 0.00 11. Calculate your total current monthly income. Add lines 2 through 10 for 4.521.00 +| \$ 500.00 5,021.00 each column. Then add the total for Column A to the total for Column B. Total current monthly income Part 2: **Determine Whether the Means Test Applies to You** 12. Calculate your current monthly income for the year. Follow these steps: 12a. Copy your total current monthly income from line 11 Copy line 11 here=> 5,021.00 Multiply by 12 (the number of months in a year) **x** 12 60.252.00 12b. The result is your annual income for this part of the form 12b. 13. Calculate the median family income that applies to you. Follow these steps: Fill in the state in which you live. VΔ Fill in the number of people in your household. 2 76,047.00 Fill in the median family income for your state and size of household. 13. To find a list of applicable median income amounts, go online using the link specified in the separate instructions for this form. This list may also be available at the bankruptcy clerk's office. 14. How do the lines compare? Line 12b is less than or equal to line 13. On the top of page 1, check box 1, There is no presumption of abuse. Go to Part 3. 14b. Line 12b is more than line 13. On the top of page 1, check box 2, The presumption of abuse is determined by Form 122A-2. Go to Part 3 and fill out Form 122A-2. Part 3: By signing here, I declare under penalty of perjury that the information on this statement and in any attachments is true and correct. X /s/ Barbara Ann Norman **Barbara Ann Norman** Signature of Debtor 1

Date **February 5, 2019**

MM / DD / YYYY

If you checked line 14a, do NOT fill out or file Form 122A-2.

If you checked line 14b, fill out Form 122A-2 and file it with this form.

Notice Required by 11 U.S.C. § 342(b) for Individuals Filing for Bankruptcy (Form 2010)

This notice is for you if:

You are an individual filing for bankruptcy, and

Your debts are primarily consumer debts. Consumer debts are defined in 11 U.S.C. § 101(8) as "incurred by an individual primarily for a personal, family, or household purpose."

The types of bankruptcy that are available to individuals

Individuals who meet the qualifications may file under one of four different chapters of Bankruptcy Code:

Chapter 7 - Liquidation

Chapter 11 - Reorganization

Chapter 12 - Voluntary repayment plan for family farmers or fishermen

Chapter 13 - Voluntary repayment plan for individuals with regular income

You should have an attorney review your decision to file for bankruptcy and the choice of chapter.

Chapte	r 7:	Liquidation
	\$245	filing fee
	\$75	administrative fee
<u>+</u>	\$15	trustee surcharge
	\$335	total fee

Chapter 7 is for individuals who have financial difficulty preventing them from paying their debts and who are willing to allow their nonexempt property to be used to pay their creditors. The primary purpose of filing under chapter 7 is to have your debts discharged. The bankruptcy discharge relieves you after bankruptcy from having to pay many of your pre-bankruptcy debts. Exceptions exist for particular debts, and liens on property may still be enforced after discharge. For example, a creditor may have the right to foreclose a home mortgage or repossess an automobile.

However, if the court finds that you have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge.

You should know that even if you file chapter 7 and you receive a discharge, some debts are not discharged under the law. Therefore, you may still be responsible to pay:

most taxes;

most student loans;

domestic support and property settlement obligations;

most fines, penalties, forfeitures, and criminal restitution obligations; and

certain debts that are not listed in your bankruptcy papers.

You may also be required to pay debts arising from:

fraud or theft:

fraud or defalcation while acting in breach of fiduciary capacity;

intentional injuries that you inflicted; and

death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs.

If your debts are primarily consumer debts, the court can dismiss your chapter 7 case if it finds that you have enough income to repay creditors a certain amount. You must file *Chapter 7 Statement of Your Current Monthly Income* (Official Form 122A–1) if you are an individual filing for bankruptcy under chapter 7. This form will determine your current monthly income and compare whether your income is more than the median income that applies in your state.

If your income is not above the median for your state, you will not have to complete the other chapter 7 form, the *Chapter 7 Means Test Calculation* (Official Form 122A–2).

If your income is above the median for your state, you must file a second form —the *Chapter 7 Means Test Calculation* (Official Form 122A–2). The calculations on the form— sometimes called the *Means Test*—deduct from your income living expenses and payments on certain debts to determine any amount available to pay unsecured creditors. If

your income is more than the median income for your state of residence and family size, depending on the results of the *Means Test*, the U.S. trustee, bankruptcy administrator, or creditors can file a motion to dismiss your case under § 707(b) of the Bankruptcy Code. If a motion is filed, the court will decide if your case should be dismissed. To avoid dismissal, you may choose to proceed under another chapter of the Bankruptcy Code.

If you are an individual filing for chapter 7 bankruptcy, the trustee may sell your property to pay your debts, subject to your right to exempt the property or a portion of the proceeds from the sale of the property. The property, and the proceeds from property that your bankruptcy trustee sells or liquidates that you are entitled to, is called *exempt property*. Exemptions may enable you to keep your home, a car, clothing, and household items or to receive some of the proceeds if the property is sold.

Exemptions are not automatic. To exempt property, you must list it on *Schedule C: The Property You Claim as Exempt* (Official Form 106C). If you do not list the property, the trustee may sell it and pay all of the proceeds to your creditors.

Chapter 11: Reorganization

\$1,167 filing fee

+ \$550 administrative fee \$1,717 total fee

Chapter 11 is often used for reorganizing a business, but is also available to individuals. The provisions of chapter 11 are too complicated to summarize briefly.

Read These Important Warnings

Because bankruptcy can have serious long-term financial and legal consequences, including loss of your property, you should hire an attorney and carefully consider all of your options before you file. Only an attorney can give you legal advice about what can happen as a result of filing for bankruptcy and what your options are. If you do file for bankruptcy, an attorney can help you fill out the forms properly and protect you, your family, your home, and your possessions.

Although the law allows you to represent yourself in bankruptcy court, you should understand that many people find it difficult to represent themselves successfully. The rules are technical, and a mistake or inaction may harm you. If you file without an attorney, you are still responsible for knowing and following all of the legal requirements.

You should not file for bankruptcy if you are not eligible to file or if you do not intend to file the necessary documents.

Bankruptcy fraud is a serious crime; you could be fined and imprisoned if you commit fraud in your bankruptcy case. Making a false statement, concealing property, or obtaining money or property by fraud in connection with a bankruptcy case can result in fines up to \$250,000, or imprisonment for up to 20 years, or both. 18 U.S.C. §§ 152, 1341, 1519, and 3571.

Chapter 12: Repayment plan for family farmers or fishermen

	\$200	filing fee
+	\$75	administrative fee
_	\$275	total fee

Similar to chapter 13, chapter 12 permits family farmers and fishermen to repay their debts over a period of time using future earnings and to discharge some debts that are not paid.

Chapter 13: Repayment plan for individuals with regular income

	\$235	filing fee
+	\$75	administrative fee
	\$310	total fee

Chapter 13 is for individuals who have regular income and would like to pay all or part of their debts in installments over a period of time and to discharge some debts that are not paid. You are eligible for chapter 13 only if your debts are not more than certain dollar amounts set forth in 11 U.S.C. § 109.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, usually using your future earnings. If the court approves your plan, the court will allow you to repay your debts, as adjusted by the plan, within 3 years or 5 years, depending on your income and other factors.

After you make all the payments under your plan, many of your debts are discharged. The debts that are not discharged and that you may still be responsible to pay include:

domestic support obligations,

most student loans,

certain taxes,

debts for fraud or theft,

debts for fraud or defalcation while acting in a fiduciary capacity,

most criminal fines and restitution obligations,

certain debts that are not listed in your bankruptcy papers,

certain debts for acts that caused death or personal injury, and

certain long-term secured debts.

Warning: File Your Forms on Time

Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information about your creditors, assets, liabilities, income, expenses and general financial condition. The court may dismiss your bankruptcy case if you do not file this information within the deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court.

For more information about the documents and their deadlines, go to: http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Bankruptcy crimes have serious consequences

If you knowingly and fraudulently conceal assets or make a false oath or statement under penalty of perjury—either orally or in writing—in connection with a bankruptcy case, you may be fined, imprisoned, or both.

All information you supply in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the U.S. Trustee, the Office of the U.S. Attorney, and other offices and employees of the U.S. Department of Justice.

Make sure the court has your mailing address

The bankruptcy court sends notices to the mailing address you list on *Voluntary Petition for Individuals Filing for Bankruptcy* (Official Form 101). To ensure that you receive information about your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address.

A married couple may file a bankruptcy case together—called a *joint case*. If you file a joint case and each spouse lists the same mailing address on the bankruptcy petition, the bankruptcy court generally will mail you and your spouse one copy of each notice, unless you file a statement with the court asking that each spouse receive separate copies.

Understand which services you could receive from credit counseling agencies

The law generally requires that you receive a credit counseling briefing from an approved credit counseling agency. 11 U.S.C. § 109(h). If you are filing a joint case, both spouses must receive the briefing. With limited exceptions, you must receive it within the 180 days *before* you file your bankruptcy petition. This briefing is usually conducted by telephone or on the Internet.

In addition, after filing a bankruptcy case, you generally must complete a financial management instructional course before you can receive a discharge. If you are filing a joint case, both spouses must complete the course.

You can obtain the list of agencies approved to provide both the briefing and the instructional course from: http://justice.gov/ust/eo/hapcpa/ccde/cc_approved.html.

In Alabama and North Carolina, go to: http://www.uscourts.gov/FederalCourts/Bankruptcy/ BankruptcyResources/ApprovedCredit AndDebtCounselors.aspx.

If you do not have access to a computer, the clerk of the bankruptcy court may be able to help you obtain the list. Ally Financial P.O. Box 380901 Bloomington, MN 55438-0901

Chesapeake General District Co 307 Albemarle Drive Ste 200B Chesapeake, VA 23322

Chesapeake General Hospital 736 Battlefield Blvd North Chesapeake, VA 23320

Elizabeth River Tunnels 700 Port Centre Pkwy Suite 2B Portsmouth, VA 23704-5901

Glasser & Glasser Crown Center, Suite 600 580 East Main Street Norfolk, VA 23510

Grand Brands 1305 Baker Road Virginia Beach, VA 23455

Home Depot P O Box 9001010 Louisville, KY 40290

Home Depot CBNA PO Box 6497 Sioux Falls, SD 57117-6497

Loan Smart 4209 East Indian River Road Chesapeake, VA 23325

Money Mart 848 Granby Street Norfolk, VA 23510 Nissan Motor Acceptance NMAC Bankruptcy Department P.O. Box 660366 Dallas, TX 75266-0366

Office of the U.S. Trustee 200 Granby Street Room 625 Norfolk, VA 23510

Progressive Leasing 256 West Data Drive Draper, UT 84020

Ramon Republica 7136 Hunters Chase Norfolk, VA 23518

State Employees Credit Union 3101 Wake Forest Road Raleigh, NC 27609-7845

US Dept of Education/GLELSI PO Box 7860 Madison, WI 53707-7860